



Course Substitution Form

(Complete this form for EACH course approved for substitution.)

The following graduate student has been given approval to substitute a course for a required course in his/her approved graduate certificate or graduate degree program:

Student's Full Legal Name: _____

Student ID Number: U _____

Degree:

Major:

Area of concentration, if applicable:

TO BE COMPLETED BY DEPARTMENT:

Department	Course No.	Course Title

is an approved substitution for:

Department	Course No.	Course Title

Justification for course substitution: _____

Required Approvals:

Major Advisor: _____ Date: _____

Graduate Studies Coordinator: _____ Date: _____

College Director of Graduate Studies: _____ Date: _____