

# College of Arts and Sciences

## Course Substitution Approval Form

This form must be forwarded to the Graduation Analyst (Scates Hall 107) to be included as a part of the student's graduation file.

Name: \_\_\_\_\_ U Number: \_\_\_\_\_ Degree: \_\_\_\_ B.A. \_\_\_\_ B.S. \_\_\_\_ B.S. in Chemistry

Major: \_\_\_\_\_ Minor: \_\_\_\_\_ Intended Graduation Date: \_\_\_\_ Dec \_\_\_\_ May \_\_\_\_ August 20 \_\_\_\_

\*If course transfers in as "unassigned" and fulfills a General Education requirement, a "Request to Apply Transfer Work Form" must be submitted to the General Education Office.

### THE REQUIREMENT

### THE SUBSTITUTION

Subject	Course #	Course Title	Sem. Hrs.	Subject	Course #	Course Title	Sem. Hrs.

Advisor's Signature (If other than Department Chairperson): \_\_\_\_\_

Date: \_\_\_\_\_

Department Chairperson's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Dean's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Graduation Analyst's Signature: \_\_\_\_\_

Date Request Processed: \_\_\_\_\_