



## COURSE SUBSTITUTION FORM

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Major: \_\_\_\_\_ Catalog Year: \_\_\_\_\_

Degree Course: \_\_\_\_\_ Substitute Course: \_\_\_\_\_

\_\_\_\_\_  
Requestor Print Name Date

\_\_\_\_\_  
Division Chair Print Name Date

\_\_\_\_\_  
Dean of Instructional Affairs Print Name Date



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