



Office of the Registrar  
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**COURSE SUBSTITUTION/ADDITION FORM**

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

Major: \_\_\_\_\_

**Course Substitution #1**

Core	Major	Specialization/Concentration	Other
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Course to be Substituted/ Requirement (Number and Title): \_\_\_\_\_

Course Substitution (Number and Title): \_\_\_\_\_

**Course Substitution #2**

Core	Major	Specialization/Concentration	Other
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Course to be Substituted/ Requirement (Number and Title): \_\_\_\_\_

Course Substitution (Number and Title): \_\_\_\_\_

Comments:

\_\_\_\_\_  
 \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department Chair's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Registrar's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Registrar's Office:**

Processed By: \_\_\_\_\_ Date: \_\_\_\_\_