|  |
| --- |
| Course Substitution*If the course is being substituted for a required Curriculum for Liberal Education course, then it will need to be approved by the Academic Dean’s Office prior to entry by the department.* |
| Student Information |
| Date:  | ID Number:  |
| Last Name:   | First Name:  |
| Major:  Option: Secondary / Dual Major :  |
| Email:  | Phone:       |

|  |  |
| --- | --- |
|  | Substitution |
| **COURSES TAKEN** |  |  | **SUBSTITUTION**  |  |
| **Dept / Number** | **Title** | **Term Taken** | **Grade** | **Credit Hours** | **Dept / Number** | **Title** | **Credit Hours** | **Major****Requirement** | **Minor Requirement** | **Major Elective** | **\*\*\*\*****University / CLE Sub (list area for CLE)** |
|  |  |       |    |    |      |      |       |       |  |       |       |
|      |  |       |    |    |      |      |       |       |  |       |       |
|      |  |       |    |    |      |      |       |       |  |       |       |
|      |  |       |    |    |      |      |       |       |  |       |       |
|      |  |       |    |    |      |      |       |       |  |       |       |
|      |  |       |    |    |      |      |       |       |  |       |       |

**\*\*\*\* All CLE Substitutions must be approved by the Associate Dean. A copy of the course syllabus and brief description of how the course fulfills the CLE must be attached for the CLE Substitution to be evaluated.**

|  |
| --- |
| **APPROVAL SIGNATURES** |
| Student Signature:  | Date:  |  | Dean Signature: ***Required for CLE Courses only*** |  |
| Advisor Signature:  | Date:  |  |  |  |

|  |
| --- |
| **COMMENTS:** |
|  |