

REQUEST FOR SUBSTITUTION OF GRADUATION REQUIREMENTS

Name:		Student ID#:
Telephone #:	Proposed date	of Graduation:
Major:	Minor:	
Has graduatio	on petition been submitted to the Office of the Registrar?	Yes No
☐ I hereby p	etition for the <u>substitution</u> of Course #: Course Title	o:
for Course #:	Course Title:	
(required for	my □major, □minor or □Core)	
Is this a cours	se taken through USD's Study Abroad Office (USD affiliated)	? Yes No
If the course	was taken through the USD Study Abroad Office please indi	cate the location of the Program:
City:	Country	:
Student Signa	ature:	Date:
Substitution f • C • S	for a Core requirement : route form to the College of Arts are for a major or minor requirement : College students should submit this form to the department SBA students submit this form to the advising office email to SMSE students submit this form to your advisor - For Office Use Only -	of the major/minor.
If this is a cou	urse substitution, does it apply for this student only \Box to all	students □?
Approved:	Denied:	
Department C Advising Office	Chair (CAS) / e (SBA) / Advisor (SMSE)	Date:
Approved:	Denied:	
Academic De	an:	Date: