Complete this form in ink or typed.

Date: __________________________

Name: __________________________  Student ID: __________________________

Major: __________________________  Email: __________________________

I hereby request permission to make the following substitutions:

Required Course: _______________________________________________________

Course to be Used as Substitute: ___________________________________________

Reasoning:
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Reviewed and Approved by:

Print Name  Signature  Date

Advisor

Department Chairperson

Verification by Student Services

Associate Dean of Academics and Student Performance  Dr. Robin Hissam

Please return form to the Student Services, Room 141 Engineering Science Building or Statler-StudentServices@mail.wvu.edu