

**BENJAMIN M. STATLER COLLEGE OF ENGINEERING AND MINERAL RESOURCES
COURSE SUBSTITUTION REQUEST [UNDERGRADUATE]**

Complete this form in ink or typed.

Date: _____

Name: _____

Student ID: _____

Major: _____

Minor: _____

I hereby request permission to make the following substitution:

Required Course: _____

Course to be Used as Substitute: _____

Institution Where Course was Taken: _____

Semester Taken or To-Be Taken: _____

Reasoning:

Reviewed and Approved by:

Print Name

Signature

Date

Advisor _____

Department Designee _____

Verification by Student Services _____

Associate Dean of Academics
and Student Performance

Dr. Robin Hissam
