

## COURSE SUBSTITUTION FORM

Please be advised that it is important to keep the integrity of all programs by following the recommended curricular sequence as designated in the Catalog. Requests for course substitutions are exceptions to the rule and must be approved by the Dean of the curriculum/major, the Dean of the course requested for substitution, and the Vice President of Academic Affairs. These approvals must be made prior to the student beginning the requested class(es). Please note that the course(s) substituted will not appear on your records/transcripts.

(Please Print)

### A COURSE SUBSTITUTION DOES NOT AFFECT GRADES OR GPA

NAME OF STUDENT \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

STUDENT ID# \_\_\_\_\_ MAJOR/CURRICULUM \_\_\_\_\_

#### PROGRAM-PRESCRIBED COURSE(S)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

#### COURSE(S) REQUESTED FOR SUBSTITUTION

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

COMMENTS/RATIONALE FOR REQUEST: \_\_\_\_\_

CATALOG YEAR \_\_\_\_\_ ☐ CATALOG PAGE (Attached) \_\_\_\_\_

STUDENT MEETS NJ STATE TRANSFER REQUIREMENTS ☐ YES ☐ NO

☐ UNOFFICIAL TRANSCRIPT (Attached)

IDENTIFY ALL PROGRAM CHANGES: \_\_\_\_\_

\_\_\_\_\_  
ACADEMIC ADVISOR (Print name, Advisor's Area/Department)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DIVISION DEAN OF CURRICULUM/MAJOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DIVISION DEAN FOR REQUESTED COURSE SUBSTITUTION

\_\_\_\_\_  
DATE

\_\_\_\_\_  
VICE PRESIDENT OF ACADEMIC AFFAIRS

\_\_\_\_\_  
DATE