

Registrar

## **COURSE SUBSTITUTION APPLICATION**

This course substitution is valid for the award of the degree approved on this application. Students must complete part I and seek the permission for part II. **Graduate students** should seek approval from their respective Graduate Program Director. **Undergraduate students** should seek approval from department Chairperson.

| Par   | rt I: Completed              | By Studer      | ıt                         |   |  |
|---|------------------------------|----------------|----------------------------|---|--|
| Degree Program:   | B.S. 🗆 Graduat               | te 🗆 Adva      | nced Certificate P         | rogram                                  |  |
| Major/Graduation Program:   | EMPLID Number:               |                |                            |   |  |
| First Name:   |                              | Last Name:     |                            |   |  |
| Current Grade Point Average:  | Total Credits Completed:     |                |                            |   |  |
| Course to be taken by student<br>(e.g. ENG 2XX)   | (e.g. ENG 2XX) (e.g.         |                | (e.g. S                    | e <b>emester offered</b><br>pring 2006) |  |
| fo  | r                            |                |                            |   |  |
| Student Signature (required):   |                              | Date: _        |                            |   |  |
| Pa  | rt II: Academic              | Approval       |                            |   |  |
| In stances where the substitution is for a discipline in a department other than the department having curriculum responsibility, the discipline chairman must also approve the substitution. |                              |                |                            |   |  |
| FOR UNDEGRADUATE STUDENTS ONLY  |                              |                |                            |   |  |
| As the <b>Discipline Chairperson</b> , I  | □ APPROVE                    | $\square$ DENY | this substitution request. |   |  |
| Discipline Chairperson (Print Name):  |                              |                |                            |   |  |
| Discipline Chairperson (Signature):   |                              |                | Date:                      |   |  |
| As the <b>Curriculum Chairperson</b> , I  | □ APPROVE                    | DENY           | this substitution request. |   |  |
| Curriculum Chairperson (Print Name):  |                              |                |                            |   |  |
| Curriculum Chairperson (Signature):   |                              |                | Date:                      |   |  |
| FOR GRADUATE STUDENTS ONLY  |                              |                |                            |   |  |
|   |                              |                | this substitutio           | on request.                             |  |
| Program Director (Print Name):  |                              |                |                            | -                                       |  |
| Program Director (Signature):   | Dat                          |                | 2:                         |   |  |
| For Office Use Only   |                              |                |                            |   |  |
| Fall Winter   | Spring                       |                | Sum                        | mer                                     |  |
| CUNYFirst update by:  | Date entered into CUNYFirst: |                |                            |   |  |

1/25/2021