



MAJOR/MINOR COURSE SUBSTITUTION FORM

Student Name:		Student ID Number:
Telephone Number:		Major:
Catalog Year:	Anticipated Grad Term:	Minor:
SSU Email:		Concentration/Track:

This form is for students to request individual course substitutions to Major or Minor course requirements stated in the Sonoma State University catalog. Students should provide a course description for each substitution requested. An approved course substitution will be reflected in the student's Degree Progress Report as such, and the requirement will show as completed. This form should be reviewed, approved and signed by the advisor prior to Department Chair approval.

The student should include subject and course number, and the name of the institution where the course was taken. Attach any additional descriptions/justifications and documents required by the department receiving this request.

<input type="checkbox"/> Major or <input type="checkbox"/> Minor Requirement Substitute course: Subject: _____ Course Number: _____ Taken at College: _____ For course: Subject: _____ Course Number: _____ If substitute course not yet completed, minimum grade accepted _____	Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No Explanation: _____ **Requirement # from DPR (RQ###): _____
<input type="checkbox"/> Major or <input type="checkbox"/> Minor Requirement Substitute course: Subject: _____ Course Number: _____ Taken at College: _____ For course: Subject: _____ Course Number: _____ If substitute course not yet completed, minimum grade accepted _____	Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No Explanation: _____ **Requirement # from DPR (RQ###): _____
<input type="checkbox"/> Major or <input type="checkbox"/> Minor Requirement Substitute course: Subject: _____ Course Number: _____ Taken at College: _____ For course: Subject: _____ Course Number: _____ If substitute course not yet completed, minimum grade accepted _____	Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No Explanation: _____ **Requirement # from DPR (RQ###): _____
Advisor Name (Print): _____ Name (Sign): _____ Date: _____	Department Chair Approval Name (Print): _____ Name (Sign): _____ Date: _____

****Requirement # can be found on the DPR in listed after the requirement that you are fulfilling with this course substitution. It is the responsibility of the final signer to send the approved original to the Admissions & Records Office or to notify the student of a denied request.**