

## **Course Substitution Request Form**

Office of the Registrar 9700 West Taron Drive Elk Grove, CA 95757 CNRegistrar@cnsu.edu

## **INSTRUCTIONS**

- Use this form to inform the Office of the Registrar of a course you are using to count towards your CNU degree.
- Courses **must** be approved by the Office of Academic Affairs prior to submitting this form.
- An official transcript of the course being substituted must be on file with the University. If it is not, the student must request an official transcript from their previous university before this form will be processed.
- The substitution will not be approved unless all signatures of approval are complete (see below).

| STUDENT INFORMATION  |                  |                |                           |                  |
|--|------------------|----------------|---------------------------|------------------|
| Name:  |                  |                |                           |                  |
| Last   |                  | First          | Middle                    |                  |
| Student ID#:   | Class of:        | Date of Birth: | Phone#:                   |                  |
| SUBSTITUTION INFORMATION   |                  |                |                           |                  |
| ALL INFORMATION MUST BE COMPLETED  |                  |                |                           |                  |
| <b>A)</b> I am requesting a substitution for the following course required for my program (course at CNU): |                  |                |                           |                  |
| Course Prefix & Number: Credits:   |                  |                |                           |                  |
| Course Title:  |                  |                |                           |                  |
| B) I am requesting this course be substituted with (course from another college):                          |                  |                |                           |                  |
| Course Prefix & Number: Credi  |                  |                | Credits:                  |                  |
| Course Title:  |                  |                |                           |                  |
| Institution (official transcript required):  |                  |                |                           |                  |
| Student Signature:   |                  | Date           | 2:                        |                  |
| Current Program of Study at CNU:   |                  |                |                           |                  |
| APPROVAL   |                  |                |                           |                  |
| INTERNAL USE ONLY Please check <b>one</b> :  |                  |                |                           |                  |
| □ Recommended  | for Approval     | _              | Not Recommended for Appro | val              |
| Office of Academic Affair  | rs Date          |                | istrar                    | Date             |
| Official Transcript o  | n file/received? |                |                           |                  |
| Entered into CAMS:   |                  |                |                           |                  |
|  |                  |                |                           | Updated 12/14 OR |