



Section A: Student Biographical Information

Last Name	First Name	Middle Initial	Date
VSU ID Number	Department	Major	Advisor
Is the student enrolled? <input type="checkbox"/> Yes <input type="checkbox"/> No Entering Freshman? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, which semester: _____ Transfer Student? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, which semester: _____ Graduating Senior <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, which semester: _____			

Section B: Course Substitution Information

List the Required Course to Meet Graduation/Degree Requirement(s) –

Prefix/Number	Course Title	Credit Hours	CORE Area (if applicable)
<i>List Course(s) to Substitute for the Required Course – Attach appropriate support materials/syllabus as needed –</i>			
Prefix/Number	Course Title	Credit Hours	CORE Area (if applicable)
Grade Received	List the Institution where the course was completed	Semester/Year	Course was Completed
Prefix/Number	Course Title	Credit Hours	CORE Area (if applicable)
Grade Received	List the Institution where the course was completed	Semester/Year	Course was Completed

Justification for the Request:

Section C: Approvals (Please route in order below)

Academic Advisor (Print)	Academic Advisor (Signature)	Date
Department Head (Print)	Department Head (Signature)	Date
Dean/Director (Print)	Dean/Director (Signature)	Date
Registrar (Print)	Registrar (Signature)	Date
*[CORE Courses] VPAA (Print)	VPAA (Signature)	Date
*[Graduate Courses] Graduate School (Print)	Graduate School (Signature)	Date