

GRADUATE COURSE SUBSTITUTION PETITION

A student wishing to file a course substitution request to the program requirements must complete Part A of this form in consultation with your adviser. Adviser signs part B. Then give the form to the Graduate Staff Assistant for Graduate Officer and Program Chair signatures. This form should be kept in the student's file.

A. Name: _____ PSU ID _____

Email _____ Major _____

Class you want to substitute: _____

What class do you plan to replace it with _____

ATTACH A COPY OF THE COURSE SYLLABUS.

Why do you think this is a viable substitution? _____

B. I approve of this substitution.

Adviser Name: _____ Date: _____

Adviser Signature: _____

C. Graduate Officer: _____ Date: _____

Graduate Officer Signature: _____

I approve of this substitution _____ I DO NOT approve the substitution _____

Comments:

D. Program Chair Name: _____ Date: _____

Please check the appropriate box below and sign.

I approve of this substitution _____ I DO NOT approve the substitution _____

Comments:

Program Chair Signature: _____ Date: _____