



Notification of Approval for Course Substitution

As Lead Faculty of the _____ Department, I hereby approve and request that the following course substitution(s) be placed in the student file of _____ and that the proper graduation credit be awarded and noted on the student transcript.

Curriculum Course _____ Substituted Course _____

Lead Faculty Signature _____ Date _____

Dean, Academic Affairs Signature _____ Date _____

R-CCC 252 July '18 Previous editions obsolete



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