



# COURSE SUBSTITUTION FORM

## FOR AN AA/AS DEGREE OR CERTIFICATE

**INSTRUCTIONS FOR STUDENTS:**

1. Obtain copies of relevant transcripts as well as catalog description and/or syllabus for each requested course.
2. Contact Department Chair for a meeting (bring documentation to meeting).
3. Make a copy of signed form for personal records.
4. Return completed form to the Records Office.

**STUDENT NAME:** \_\_\_\_\_

**STUDENT ID #:** \_\_\_\_\_

**DEPARTMENT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**MAJOR:** \_\_\_\_\_

**CHECK ONE:**  DEGREE  CERTIFICATE

<u>COURSE IN QUESTION</u>	<u>COLLEGE WHERE COURSE WAS COMPLETED</u>	<u>MISSION COLLEGE COURSE SUBSTITUTE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

REMARKS:

\_\_\_\_\_  
Department Chair signature for approval