

Howard College/SWCID Course Substitution Form

Student Name: _____ Student ID: _____

Date: _____ Site: _____ Advisor's Name: _____

Major/Program Area/Degree or Certificate: _____

Catalog: _____

List Howard College/SWCID required course title & number.	List course title & number of course to be used as a substitute for the required course.	List the name of the college/university where course was taken. If this course was completed at another institution, a copy of the transcript and course description should be attached.

Justification for substitution: _____ _____ _____ _____	
_____ Approve _____ Disapprove _____ Signature of Program/Division Director	Date: _____
_____ Approve _____ Disapprove _____ Signature of Instructional Dean	Date: _____
_____ Approve _____ Disapprove _____ Signature of Executive Dean	Date: _____
_____ Approve _____ Disapprove _____ Signature of Vice President of Academic and Student Affairs	Date: _____
_____ Signature of Registrar	Date: _____