

Undergraduate Course Substitution Form

Student Information														
Last Name					Firs	t Name								
GWID					GW	Email					@	gwmail.g	wu.edu	
SEAS Major					Degree		□ B.A	١.		B.S.				
	Required Course		Subject	Course No.	Course T		itle				Credit	Credit Hours		
	Substitute Course		Subject	Course No.		Course Title					Credit	Hours		
			,											
	Reason for Waiver													
	Require	d Course	Subject	Course No.		Course T	ïtle				Credit Hours			
			Subject	Course No.		Course T	itle				Credit Hours			
	Substitute Course		,											
	Reason	for Waiver												
Required Signatures														
Faculty Advisor Signature							Last Name				Date			
Dept Chair Signature							Last Name				Date			

For Advising Office Use Only