

**COURSE SUBSTITUTION FORM**

**Student Name** \_\_\_\_\_ **ID/SSN #** \_\_\_\_\_  
(Please print all information) Last First MI

**Major/Minor** \_\_\_\_\_ **Degree/Cert** \_\_\_\_\_ **Catalog Year** \_\_\_\_\_

**LCSC Course Substitution (for major/minor requirements)**

LCSC Course Taken:					Substitute for LCSC Course:			
Subj	No	Cr	Term	Title	Subj	No	Cr	Title

**THIS SUBSTITUTION IS VALID ONLY FOR THE MAJOR/MINOR LISTED ABOVE**

Advisor Name (printed) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Division Chair Name (printed) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_