

COURSE SUBSTITUTION FORM

Student Name: _____ ID/SSN: _____

Major/Minor: _____ Degree/Cert: _____ Catalog Year: _____

Lewis Clark State College Course Substitution (for major/minor requirements)

<u>LC State Course Taken:</u>					<u>Course to be replaced on Degree Audit:</u>			
Subject	Number	Credit	Term	Title	Subject	Number	Credit	Title

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

Advisor Name: _____

Signature: _____

Date: _____

Division Chair Name: _____

Signature: _____

Date: _____