



Section A: Student Biographical Information

Last Name	First Name	Middle Initial	Date
VSU ID Number	Department	Major	
<input type="checkbox"/> Undergraduate Course <input type="checkbox"/> *Graduate Course	Is the student enrolled? <input type="checkbox"/> No <input type="checkbox"/> Yes Entering Freshman? <input type="checkbox"/> No <input type="checkbox"/> Yes – List Semester/Year: _____ Transfer Student? <input type="checkbox"/> No <input type="checkbox"/> Yes – List Semester/Year: _____ Graduating? <input type="checkbox"/> No <input type="checkbox"/> Yes – List Semester/Year: _____		

Section B: Course Substitution Information: *List the Required Course(s) to Meet Graduation/Degree Requirement(s) -*

Course #1) VSU Prefix/Number & Title	Credit Hours	*VSU CORE Area A-F (if applicable)			
<i>List Course(s) to Substitute for the Required Course –</i>					
Prefix/Number & Course Title	Institution where the course was completed	Grade	Semester/Year Completed	Credit Hours	*VSU CORE Area A-F (if applicable)
Prefix/Number & Course Title	Institution where the course was completed	Grade	Semester/Year Completed	Credit Hours	*VSU CORE Area A-F (if applicable)

Course #2) VSU Prefix/Number & Title	Credit Hours	*VSU CORE Area A-F (if applicable)			
<i>List Course(s) to Substitute for the Required Course –</i>					
Prefix/Number & Course Title	Institution where the course was completed	Grade	Semester/Year Completed	Credit Hours	*VSU CORE Area A-F (if applicable)
Prefix/Number & Course Title	Institution where the course was completed	Grade	Semester/Year Completed	Credit Hours	*VSU CORE Area A-F (if applicable)

Justification for the Request: *Attach appropriate support materials, syllabus, course description, etc. as needed –*

Section C: Approvals (Please route in order below)

1) Academic Advisor (Name / Signature / Date)	4) *[CORE A-F] AP for Academic Programs & Services (Name / Sig. / Date)
2) Department Head (Name / Signature / Date)	5) *[Graduate] AP for Graduate Studies & Research (Name / Signature / Date)
3) Dean / Director (Name / Signature / Date)	6) Registrar (Name / Signature / Date)

This form is not official until it has been signed by the Registrar.