Core Course Substitution Request

1. Academic Year:	
2. Term:	
3. Name:	
4. Student ID:	
5. Program:	
6. Substituting Course(s) applying:	
7. Explain your reasons for requesting for substituting core course related to your research you need to gain a <u>prior</u> approval from the program chair. However, an approval after would not be accepted.	
For the above reasons, I hereby request for the substituting core course.	
Date:	_(yyyy/mm/dd)
Name of Applicant:	(Signature

Students should not assume that course substitution requests will be approved by the submission of the form. Until a student receives confirmation that a substitution has been approved, the student should continue to consider or explore alternative options.

Result on Core Course Substitution

1. Academic Year:		
2. Term:		
3. Name		
4. Student ID:		
5. Program:		
6. Substituting Course(s) a	applying	
7. Program Chair Comme	nts	
Result (P / NP)		
	Date:	(yyyy/mm/dd)
	Program Chair:	(Signature)