

GEORGIA HIGHLANDS COLLEGE – REQUEST FOR SUBSTITUTION IN CURRICULUM FOR GRADUATION  
TO BE SUBMITTED TO CURRICULUM COMMITTEE, OFFICE OF VP FOR ACADEMIC AFFAIRS

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Anticipated date of graduation: \_\_\_\_\_

Student Identification # \_\_\_\_\_  
Phone #: H \_\_\_\_\_ W \_\_\_\_\_  
Pathway: \_\_\_\_\_

I would like to request that the following course substitution be made in my curriculum in order to complete graduation requirements at Georgia Highlands College.  
Requested substitution:

Course Name and Number: \_\_\_\_\_ Semester Hours: \_\_\_\_\_

Name of Institution: \_\_\_\_\_ Location: \_\_\_\_\_

When Completed: \_\_\_\_\_ Grade: \_\_\_\_\_

Georgia Highlands College Course Requirement: \_\_\_\_\_  
ATTACH A COPY OF COURSE DESCRIPTION FROM COLLEGE CATALOG IF COURSE WAS  
TAKEN AT A COLLEGE OTHER THAN GEORGIA HIGHLANDS COLLEGE.

Are other substitutions being requested at this time? \_\_\_\_\_

Have previous course substitutions been granted? \_\_\_\_\_ If so, give details on back of sheet.

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Comments: \_\_\_\_\_  
\_\_\_\_\_

.....  
Signature of Advisor \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Comments: \_\_\_\_\_  
\_\_\_\_\_

.....  
Signature of Registrar \_\_\_\_\_ Date: \_\_\_\_\_

Registrar Comments: \_\_\_\_\_  
\_\_\_\_\_

.....  
Sending Division Chair Recommendation: Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Signature: \_\_\_\_\_  
.....

Receiving Division Chair Recommendation: Approved: \_\_\_\_\_ Not approved: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Signature: \_\_\_\_\_  
.....

Curriculum Committee Action: Approved: \_\_\_\_\_ Not approved: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Vice President for Academic Affairs Signature: \_\_\_\_\_