

REQUEST FOR COURSE SUBSTITUTION

(Students should consult with an Academic Advisor)

This form is to request a course substitution for a required course, because either the program requirements have changed or the prescribed course is not available. Approval for a substitution should normally be sought prior to enrolling in the substitute course. In the case of a substitute course that was completed previously outside of KPU, the transfer of the course to KPU must be completed prior to requesting a substitution.

A course substitution request must relate to the program in which the student is <u>currently</u> enrolled – i.e., the program shown when the student logs-on to MAP - $\frac{kpu.ca/myactionplan}{kpu.ca/myactionplan}$ If the course substitution is intended for a different program, then the student must declare or change into that program before making a course substitution request (see $\frac{kpu.ca}{declaration}$)

All requests for course substitution must be submitted to the Dean's Office. If approved by the Dean or Associate Dean as academically appropriate, the request will be forwarded to the Graduation Unit of the Office of the Registrar to be applied to the student's MAP audit. Please be advised that the entire process can take up to 5 weeks. Any course substitutions should be completed before a student applies to graduate. For more information please see an Academic Advisor.

Student Information:			
First & Last Name		Student ID Number	
Student Signature		KPU email	
Student Signature		Ki o cinali	
Program of Study to which substitution applies		Expected Date of Progran	n Completion
			20
Which yearly edition of the University Calendar do you intend to fulfill the program graduation requirements for? 20			
Rationale for the course substitution (required):			
The requirement is: The course I want to substitute is (Subject Code, Number and Title):			
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Dean/Assoc. Dean Use Only			
Print Name:	Signature:		Date
	Approved [(forward to OBog)		Denied [/return to student)
	Approved □ (forward to OReg)		Denied (return to student)
Office of Registrar Use Only			
Date Received:	Date Processed:		Initials:
Date neceived.	Date Hocesseu.		minuais.