



Course Substitution Request

The Peninsula's Community College

Part I. (Student completes - See below for instructions)

Name _____ Student ID _____

Address _____
(Street)

Date _____ Academic Division Dean _____

Curriculum _____ Catalog Year _____ AA AS AAS Diploma Certificate

Justification for course substitution:

Substitution Course

Course Prefix	Course Number	Credits	For	Course Prefix	Course Number	Credits

It is understood that this form is used only for substitution of Thomas Nelson courses and/or courses that have been officially evaluated from other colleges and accepted by TNCC for credit.

If approved, substituted course is applicable only to the curriculum listed. If the degree level is AA or AS, it is further understood that the transferability of the substituted course will be determined by the senior institution.

Student Signature _____

Date _____

Part II. (Academic Division Dean)

Comments:

Dean's Signature _____

Date _____

Approved Disapproved

Instructions: **Student:** Complete Part 1, submit form to Dean
Dean: Review request, indicate action, sign (Part 2) and forward to Enrollment Services Office.
Enrollment Services: Update data, forward copy to division, provide copy to student.

Office Use:
Received by _____
Date updated by _____
Notification to Division _____
Notification to Student _____

Date _____
Date _____
Date _____
Date _____