

REQUEST TO SUBSTITUTE

MAJOR COURSE REQUIREMENT

This substitution form is for all students requesting to substitute a course for a Major requirement. The student must submit this form and supporting documentation to the Major Department Chair for review.

Directions:

- 1.) Attach a typed letter and provide an explanation of the course(s) being requested to use as a substitute(s) and the reason for the request.
- 2.) Include a copy of the course description.

Copy to: Student Email, Advisor Email, Other: _

- 3.) Get all appropriate signatures.
- 4.) If the student plans to take the course at another institution, the student must:
 - a. Receive approval prior to enrolling in the course outside of NJCU.
 - b. Submit the approved substitution form to the Transfer Resource Center.
 - c. Transfer credits will only be granted for courses at the college level (100+) and with grades of C or better.
 - d. Request an official transcript from the other institution immediately after completing the course(s) and have it sent to:

Transfer Recourse Center New Jersey City University	FOR EVALUATOR'S USE ONLY:				
University Advisement Center	DATE TRANSCRIPT(S) RECEIVED: PROCESSED BY:		CREDI		
2039 Kennedy Boulevard Jersey City, New Jersey 07305 – 1597			DATE:		
	WAIVER#				
		2			
(Last Name) (First Name)		(Gothic ID)			
		_ 4			
(Home Address, City, State & Zip code)		(Phone Number Home/Cell)			
· · · · · · · · · · · · · · · · · · ·					
I(NJCU/Personal Email Address)		5	(Major/Minor)		
(NJCO/Tersonal Email Address)			(wiajoi/willor)		
5. Course(s) being requested:		7. Major Requirements t			
Course Catalog # Course Title Credits		Course Catalog#	Course Title	Credits	
7. At what institution will course(s) be taken?NJ	CU Other	r, please specify:			
3. Is the course(s) listed on your Transfer Credit Evalu	ation?	_ If not, what semester will	l course(s) be take	n	
	(Yes/No) 10				
(Student's Signature) (Date)	10	(Advisor's Signature)	(Date)	(Email address)	
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FOR CHAIR'S USE ONLY: APPROVED N	NOT APPROVE	D RETURNED TO	STUDENT (Pend	ing additional informatior	
Department Chair) (	DATE)				
COMMENTS.					
COMMENTS:	·····				

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