

**NATHAN WEISS GRADUATE COLLEGE
KEAN UNIVERSITY
Office of Graduate Student Services
EC-218A**

SUBSTITUTION OF GRADUATE COURSE WORK

Date _____ Degree Program & Option _____

Name _____ Student ID # _____

Address _____ Home Phone _____

_____ Business Phone _____

THIS FORM NEEDS TO BE COMPLETED ONLY WHEN A SUBSTITUTION IS NECESSARY FOR A COURSE SPECIFIED IN THE PROGRAM.

Course(s) requested taken at Kean University

To be substituted for the following which appear on the original course outline. Must be completed by Program Coordinator.

Dept. Number Course Title Grade/Date Taken

Title

Reason for request: Explain and give dates when you expect to register fore this/these course(s).

Approved

Denied

Approved

Denied

Program Coordinator

Date

Office of Graduate Studies

Date

PROCEDURES

1. Fill out the form completely. Indicate all course numbers involved in the request and the reason for the request.
2. Arrange for a conference with your Program Coordinator and obtain his/her signature of approval. The approved form must then be forwarded to the Office of Graduate Student Services (EC-218A).
3. A copy of the approved form will be sent to you for confirmation.