

One Stop Service Center: Center for Academic Success (CAS), 1st floor 908-73-REGME regme@kean.edu

Kean Ocean Administrative Office: Gateway Building, 103 732-255-0356

Fax: 732-255-0465 keanocc@kean.edu

## Substitution of Graduate Coursework Request

\*This Request should be submitted in the event that there is a need to substitute the required coursework for a graduate degree/program.\*

Please submit this completed form with the required approvals to the One Stop Service Center, CAS Building (1st floor) or the Gateway Building on the Kean Ocean campus. Students will be notified of the outcome of the request via their Kean email address.

| Student's Last Name:  Student's Telephone #: |   |          |                                    |         | Student's First Name:  Student's Email Address: |       |                              |                                  | Anticipated Graduation Date (mo/yr):  Student's ID #: |   |              |       |
|--|---|----------|------------------------------------|---------|---|-------|------------------------------|----------------------------------|---|---|--------------|-------|
|  |   |          |                                    |         |   |       |                              |                                  |   |   |              |       |
| Course(s) taken at Kean                      |   |          |                                    |         |   |       |                              | Substituted for Required Courses |   |   |              |       |
| Semester                                     | Subject                                 | Course # | Course Title                       | Cre     |   | Grade | Semester                     | Subject                          | Course #  | Course Title  | #<br>Credits | Grade |
| Fall 2017                                    | CED                                     | 5966     | Advanced Couns<br>Skills and Pract | 0       | 3   | В     | Spring 2018                  | CED                              | 5993  | Legal, Ethical, and<br>Professional Issues in<br>Counseling | 3            | В     |
|  |   |          |                                    |         |   |       |                              |                                  |   |   |              |       |
|  |   |          |                                    |         |   |       |                              |                                  |   |   |              |       |
| Part II                                      | I – Ap                                  | prova    | <u>ls</u>                          |         |   |       |                              |                                  | •   |   |              |       |
| Program Coordinator's Name: Prog             |   |          |                                    | Program | gram Coordinator's Signature:                   |       |                              |                                  | Date:   |   |              |       |
|  |   |          |                                    |         |   |       |                              |                                  |   |   |              |       |
|  |   |          |                                    |         |   |       |                              |                                  |   |   |              |       |
| Received                                     | at One Sto                              | p/Kean O | cean (initials/date):              |         |   |       |                              |                                  |   |   |              |       |
|  |   |          |                                    |         |   |       |                              |                                  |   |   |              |       |
|  |   |          |                                    |         |   |       |                              |                                  |   |   |              |       |
|  |   |          |                                    |         |   |       |                              |                                  |   |   |              |       |
| For Of                                       | fice o                                  | f the R  | egistrar's a                       | pprova  | ıl or   | nly:  |                              |                                  |   |   |              |       |
|  | ☐ Preliminary Approval☐ Final Approval☐ |          |                                    |         |   |       | □ Preliminarily Not Approved |                                  |   |   |              |       |
| □ Preli                                      |   |          |                                    |         |   |       | ☐ Final Not Approved  Date:  |                                  |   |   |              |       |