

# COURSE SUBSTITUTION FORM

Student Name \_\_\_\_\_  
(Please Print)

Student ID # \_\_\_\_\_

**Helena College allows course substitutions when there is a compelling reason to do so. All course substitutions must maintain the integrity of the degree and comply with the following guidelines:**

- Course substitutions must be approved by the Department Faculty.
- If the substitution is for a course outside of the student's department, the appropriate Department Chair must approve it along with the Department Faculty.
- Course substitutions will not reduce the number of credits needed to complete the student's program of study.
- For purposes of a documented disability, the student must provide the appropriate documentation to the Disability Resources Coordinator as part of this process. For more details concerning a documented disability and a course substitution request, information may be found on the College's Disability Resources web page.
- Decisions may be appealed. Please see the Registrar's Office.

Helena College Required Course			Requested Substitution		
Course Number	Course Title	Credits	Course Number	Course Title	Credits

**Reason for Substitution (Please provide any additional documentation):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
By signing my name above I confirm I am the individual. (MM/DD/YY)

**Department Faculty Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Department Chair Signature (If Required):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Registrar Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_