

Sociology Department
University of California, Santa Cruz
1156 High Street • Santa Cruz, CA 95064
Phone: 831.459.4497 • Fax: 831.459.3518

COURSE SUBSTITUTION PETITION

NAME _____ MAJOR/MINOR _____ ID # _____

EMAIL _____ CLASS LEVEL frosh soph junior senior

COURSE TO TAKE/TAKEN

Course Subject/Number: _____ Units: _____

Course Name: _____

Have you completed the course? yes; grade: _____ no

Is this a UCSC Course? yes no; course offered at: _____

Items provided to support and confirm this request*:

- Copy of course syllabus: REQUIRED Copy of unofficial grade report
 Copy of catalog description Other: _____

* These documents are not required if the course has been previously approved.

See: <http://sociology.ucsc.edu/undergraduate/advising/course-subs.html>

COURSE/REQUIREMENT TO REPLACE

What course or requirement will this replace? _____

Please provide any additional information for this request:

Student Signature: _____ Date: _____

DEPARTMENT USE ONLY

- Approved* for the student's curriculum *Not approved* for the student's curriculum

Faculty Signature: _____ Date: _____

Comments/Conditions: _____

