



# Course Substitution/Course Exemption

Student Name: \_\_\_\_\_

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

Program: \_\_\_\_\_

The following course substitution(s) is/are approved:

substitution       exemption  
**FGC REQUIRED COURSE:**  
Number &  
Name \_\_\_\_\_

**SUBSTITUTE COURSE:**  
Number &  
Name \_\_\_\_\_  
  
Institution \_\_\_\_\_

substitution       exemption  
**FGC REQUIRED COURSE:**  
Number &  
Name \_\_\_\_\_

**SUBSTITUTE COURSE:**  
Number &  
Name \_\_\_\_\_  
  
Institution \_\_\_\_\_

substitution       exemption  
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Number &  
Name \_\_\_\_\_

**SUBSTITUTE COURSE:**  
Number &  
Name \_\_\_\_\_  
  
Institution \_\_\_\_\_

substitution       exemption  
**FGC REQUIRED COURSE:**  
Number &  
Name \_\_\_\_\_

**SUBSTITUTE COURSE:**  
Number &  
Name \_\_\_\_\_  
  
Institution \_\_\_\_\_

**APPROVAL:**

\_\_\_\_\_  
Advisor Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President or designee

\_\_\_\_\_  
Date