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Texas Woman's University
Office of the Registrar

Degree Plan Substitution

For Undergraduate Studies

Substitutions for core requirements must be approved by Undergraduate Studies

STUDENT ID:_____ NAME (PRINT):_____, _____
LAST FIRST MI

Phone number: _____ TWU E-mail: _____

Degree: _____ Major: _____ Concentration: _____

Replace Course: _____ **With course:** _____ **Hours:** _____

Term taken: _____ Prerequisite to other courses: ☐ Y / ☐ N (If yes, complete part B)

Reason for Substitution:_____

Replace Course: _____ **With course:** _____ **Hours:** _____

Term taken: _____ Prerequisite to other courses: ☐ Y / ☐ N (If yes, complete part B)

Reason for Substitution:_____

Replace Course: _____ **With course:** _____ **Hours:** _____

Term taken: _____ Prerequisite to other courses: ☐ Y / ☐ N (If yes, complete part B)

Reason for Substitution:_____

Replace Course: _____ **With course:** _____ **Hours:** _____

Term taken: _____ Prerequisite to other courses: ☐ Y / ☐ N (If yes, complete part B)

Reason for Substitution:_____

Waive courses: _____

Reason for waiver: _____

Comments: _____

_____

_____

Department: _____ Date: _____

Requested by: _____ Signature: _____
Please print

*In order to be processed when digitally signed, this form must be submitted to the Registrar's Office via the advisor's TWU e-mail.

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Texas Woman's University
Office of the Registrar

Undergraduate Degree Plan Substitution

Part B

STUDENT ID: _____

NAME:_____, _____ _____
LAST FIRST MI

Pre-requisite course: _____

Courses requiring pre-requisite: _____

_____

Pre-requisite course: _____

Courses requiring pre-requisite: _____

_____

Pre-requisite course: _____

Courses requiring pre-requisite: _____

_____

Pre-requisite course: _____

Courses requiring pre-requisite: _____

_____

Department: _____ Date: _____

Requested by: _____ Signature: _____
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