



54 COLLEGE DRIVE • MARION, NC 28752 • 828.652.6021 • FAX 828.659.0430 • admissions@go.mcdowelltech.edu

REQUEST FOR COURSE SUBSTITUTION

NAME: _____
Last First Middle

STUDENT ID #/ SOCIAL : _____ DATE: _____

EMAIL: _____ CONTACT PHONE: _____

Curriculum: _____

Semester and year you plan to use substitution _____

Blanket Substitution: yes ☐ no ☐ (see list below)

I request permission to substitute:

_____ for _____
(Course number and name) (Course number and name)

Reason(s) for request: _____

Approval of Request for Course Substitution (Not required for blanket substitutions)

Advisor

Instructor

VP of Academics & Student Services/CAO

Dean/Department Chair

ACA-122 for ACA-115
BIO-175 for BIO-275
BIO-275 for BIO-175
BIO-165/166 for BIO-168/169
BIO-165/166 or BIO-168/169 for BIO-163
CIS-110 for CIS-113

CIS-110 for CTS-115 (Cosmetology)
ENG-111 for ENG-101
ENG-113 or ENG-114 for ENG-112
HEA-110 for NUT-110 (not applicable for nursing program)
MAT-140/A for MAT-143
MAT-140/A or MAT-143 for MAT-110

MAT-151/A for MAT-152
MAT-161/A for MAT-171
MAT-175 for either MAT-171 or MAT-172