

Course Equivalency and Program Course Substitution Form

Name: _____
Last First Middle

Student ID: _____ **Phone:** (_____) _____

Email: _____

<p>Instructions:</p> <ol style="list-style-type: none"> Determine the purpose of request and complete this form. Attach the following documentation in support of this request: <i>NOTE: Required documentation varies by area. Additional materials may be required.</i> <ul style="list-style-type: none"> <input type="checkbox"/> Unofficial transcripts (<i>required</i>) <input type="checkbox"/> Course catalog description (<i>required</i>) <input type="checkbox"/> Course syllabus <input type="checkbox"/> Sample work from the course Submit this form with attachments to department chairperson Mt. SAC Department Chairs <p>Request Official Transcripts. Official Transcripts must be received by the Admissions and Records Office before this form can be processed by Admissions and Records. Submitting Transcripts from Other Colleges</p>	<p>Purpose of Request:</p> <p>[E] Equivalent Coursework: To request credit for a course taken somewhere else that is equivalent to a Mt. SAC course. Submit form to the department chairperson. If approved, the coursework will be applied towards prerequisites, certificates, AA or AS degrees in the same manner as the equivalent course offered at Mt. SAC.</p> <p>[P] Program Course Substitution: To substitute a required course that is part of a Mt. SAC degree or certificate with an alternate course. Submit form to the department chairperson of the program.</p> <p>If requesting a program course substitution, list name of the certificate or degree: _____</p>
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Purpose [E or P]	Completed Course (Name, Number, & Title)	Units	Completed at (Name of College)	Term & Year	Grade	Proposed equivalent Mt. SAC course (Course Name, Number, & Title)	OFFICE USE ONLY	
							Approved	Denied
E	<i>Example: ENGL 101 Freshman Composition</i>	4	<i>Fullerton College</i>	<i>Fall 2009</i>	A	<i>ENGL 1A Freshman Composition</i>	✓	

Additional comments regarding program course substitution:

OFFICE USE ONLY

Rationale for Denial:

Department Chairperson: _____ **Date:** _____

Received by Division Dean: _____ **Date:** _____

Forwarded to Admissions & Records: _____ **Date:** _____

Official Transcript Grade Verification: _____ **Date:** _____