

**OFFICE OF THE DEAN OF ADMISSIONS AND RECORDS
UNIVERSITY OF TENNESSEE**

Student: _____ Catalog (year): _____
ID #: _____ Major & Conc.: _____
College: EHHS Minor: _____
Classification: _____ Intended Graduation Date: _____
Cumulative GPA: _____ Email Address: _____
Phone Number: _____

To the Committee on Degrees:

I wish to make the following substitution (s) or request (s):

Reasons for the above substitution or request:

- _____ Change of course number
- _____ Unable to schedule the required course
- _____ Similar course content
- _____ Acceptable transfer credit*
- _____ Other (explain) _____

Approved: _____ Date: _____
Faculty Advisor

Approved: _____ Date: _____
Department Head or Designee

Approved: _____ Date: _____
Dean of College or Designee

Approved: _____ Date: _____
Registrar

* For transfer work, use UT course number or LD/UD designation from academic history. Do not use a course number from another institution.

