

## **Graduate Student Course Substitution Request**

Student Information			
Student Name:	Studer	Student Number:	
Graduate Program:	Email Address:		
<b>Course Information</b> Are you substituting more than one If more than one course is being sub	course?  Yes  No stituted please include the additional	information on page 2.	
Current Course Information			
Course Title:	Course Code:	Credit Hours:	
<i>Proposed Substitute Course(s)</i> Complete the second line only if sub	stituting two courses for one.		
Course Title:	Course Code:	Credit Hours:	
Course Title:	Course Code:	Credit Hours:	
Rationale for Selection(s):			

## Signatures

Name	Signature	Date
Student Name	Student Signature	Date
Supervisor/Advisor Name	Supervisor/Advisor Signature	Date
GPC Chair (or designate) Name	GPC Chair (or designate) Signature	Date

Please send completed form to graduateadmissions@uwinnipeg.ca for approval

Graduate Studies Office approval must be received before the end of the course change period for the term in which the substitute course begins. See the the Graduate Studies Academic Calendar for dates.

Dean of Graduate Studies Signature

## **Additional Course Information**

Current Course Information		
Course Title:	Course Code:	Credit Hours:
<i>Proposed Substitute Course(s)</i> Complete the second line only if substi	ituting two courses for one.	
Course Title:	Course Code:	Credit Hours:
Course Title:	Course Code:	Credit Hours:
Rationale for Selection(s):		
Current Course Information		
Course Title:	Course Code:	Credit Hours:
Proposed Substitute Course(s) Complete the second line only if subst	ituting two courses for one.	
Course Title:	Course Code:	Credit Hours:
Course Title:	Course Code:	Credit Hours:
Rationale for Selection(s):		
Current Course Information		
Course Title:	Course Code:	Credit Hours:
<i>Proposed Substitute Course(s)</i> Complete the second line only if substi	ituting two courses for one.	
Course Title:	Course Code:	Credit Hours:
Course Title:	Course Code:	Credit Hours:
Rationale for Selection(s):		