



Course Substitution & Transfer Credit Re-Articulation

Student Name: _____

Student ID#: _____

Degree: _____ Major & Concentration: _____

Minor: _____

OPTION ONE: COURSE SUBSTITUTION

Replaces a program requirement with another.

Major/Minor Required Course(s): <i>(subject and course number)</i>	Substituted Course(s): <i>(subject and course number)</i>

Approvals:

Chairperson - Department Offering Requirement Date

Chairperson - Student's Major Department Date

Dean - Student's Degree Program Date

Remarks: _____

OPTION TWO: TRANSFER CREDIT RE-ARTICULATION

Modifies how accepted transfer credit is posted on a student's CCSU transcript. If available, please attach the course description(s).

Transfer Institution: <i>(College or university name)</i>	Transfer Course: <i>(Subject, course number, & title from transfer institution)</i>	Updated Articulation: <i>(CCSU course to be recorded on student's transcript)</i>	General Education: <i>(If applicable, indicate GE requirement that course should fulfill)</i>	Credits: <i>(Specify the number of credits to award)</i>	Approval: <i>(Chairperson of department offering articulated course)</i>	Add to Transfer Database? <i>(use for future evaluations)</i>
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No

(If needed, attach additional copies of this form)

Submit the completed form to:
Office of the Registrar, Willard-DiLoreto, Room D202
Fax (860) 832-2250, E-mail regstaff@ccsu.edu