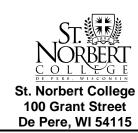
Core Curriculum Petition for Course Substitution



Please Print:			
SNC ID Number:			
Last Name	First Name		
Address			
City, State, Zip			
Email:			
Phone	Advisor		
		Action	Taken Approved
Course Requested for Consideration:			Denied
		Comme	ents:
Area of Core:	Title:		
Where Taken (If not at SNC):			
When (Term & Veer)			
·			
Justification for substitution (explain specific need and fit with the Core Curriculum area). If more space is needed, attach additional pages:			
		Ву:	
Student's Signature:	Date:	Date:	
Please Attach Syllabus.			