DOANE UNIVERSITY
UNDERGRADUATE CORE CURRICULUM COMMITTEE

Doane Plan
or
Core Curriculum
Course Substitution Request Form

Student’s name ________________________________ Date _________________________

Student’s ID# ______________________________ Student’s Mailbox # ________________

Class level at Doane:      FR     SO     JR     SR     (circle one)

Catalog year/year of entry:______________________________________________________

Advisor’s name: ______________________________________________________________

Description of proposed substitution _____________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

In addition to the above information, the student must attach a letter, signed by the student,
his/her faculty advisor, and any other appropriate members of the faculty who would be
knowledgeable concerning the request. The letter must include a:

• statement of the proposed substitution

• detailed background for the request explaining why the substitution is needed

• detailed rationale explaining how this substitution is the best available alternative
  providing the student a comparable experience

The student must attach this form to his/her letter of request and submit it to the Faculty Office
on or before the first of each month.

Requests will be addressed at the next regularly scheduled meeting of the committee.

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