

WKU ID# \_\_\_\_\_ Last Name, First Name \_\_\_\_\_

Program: \_\_\_\_\_ Estimated Degree Completion Term: \_\_\_\_\_

**COURSE SUBSTITUTION (WKU courses only)** *If a required course substitution (Y), please attach a syllabus for both courses.*

|        | COURSE PREFIX, NUMBER, AND TITLE | HOURS | EQUIVALENT (Y/N) | REQ. COURSE (Y/N) |
|--------|----------------------------------|-------|------------------|-------------------|
| REMOVE |                                  |       |                  |                   |
| ADD    |                                  |       |                  |                   |
| REMOVE |                                  |       |                  |                   |
| ADD    |                                  |       |                  |                   |
| REMOVE |                                  |       |                  |                   |
| ADD    |                                  |       |                  |                   |
| REMOVE |                                  |       |                  |                   |
| ADD    |                                  |       |                  |                   |
| REMOVE |                                  |       |                  |                   |
| ADD    |                                  |       |                  |                   |

**TRANSFER COURSE(S)** *If the transfer course is not equivalent (N) AND will replace a required course (Y), please attach a syllabus for both courses. Transfer courses using quarter hours will be multiplied by 0.67 to establish semester hours applied at WKU.*

|        | COURSE PREFIX, NUMBER, AND TITLE | HRS | EQUIVALENT (Y/N) | REQ.CRSE (Y/N) | TRANSFER INSTITUTION |
|--------|----------------------------------|-----|------------------|----------------|----------------------|
| REMOVE |                                  |     |                  |                |                      |
| ADD    |                                  |     |                  |                |                      |
| REMOVE |                                  |     |                  |                |                      |
| ADD    |                                  |     |                  |                |                      |
| REMOVE |                                  |     |                  |                |                      |
| ADD    |                                  |     |                  |                |                      |
| REMOVE |                                  |     |                  |                |                      |
| ADD    |                                  |     |                  |                |                      |
| REMOVE |                                  |     |                  |                |                      |
| ADD    |                                  |     |                  |                |                      |

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
College Dean Signature Date

\_\_\_\_\_  
Advisor Signature Date

**\*Submit to [graduate.records@wku.edu](mailto:graduate.records@wku.edu) for approval\***

\_\_\_\_\_  
Graduate Program Coordinator or Dept. Head Signature Date

\_\_\_\_\_  
Graduate School Official Signature Date