Texas Woman's University Office of the Registrar

Doc Type: _	SUB			
Description	ı:			
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Graduate Degree Plan Substitution

STUDENT ID:NAI	ME (PRINT):				
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Phone number:					
Degree: Major:		Track / Emphasis: _			
		Doctoral	Maste	rs	_ Certificate
	Со	urse Substitutions			
Replace Course:	With cours	e:	Hours:	Term taken:	
Prerequisite to other courses: _	Y/	_ N (If yes, also complete G	iraduate Prerequisit	e Waiver)	
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Reason for Substitution:					
		onal Electives Options			
Add Elective course(s):					
Comments:					
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Department:		ра	ιε		
Academic Advisor or Department Chair:		ature, please save as PDF an	d e-mail from your		
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