

## Course Substitution Request - CSIS Department

**Date:**

**Name:**

**Student ID:**

**Email address:**

**Limit on the number of units you can still transfer:**

\*\*Note that you can only substitute a limited number of courses. Please check with the Undergraduate Advising Office in Craven Hall 1300 as to how many units you are allowed to transfer over.

Transfer college:
Course #:
Course Name:
Number of Units (please note semester or quarter):
Date taken:
Grade Received:
CSUSM Course Substitution:
CSUSM Course #:
CSUSM Course Name:
CSUSM Number of Units: