



# Request for Substitution of Credit

[www.tstc.edu](http://www.tstc.edu)

Date	Veteran yes ___ no ___
Name (Last, First Middle)	Social Security #
Current Major	TSTC ID#
Degree Audit Code	Catalog (Curriculum) Year

Please ensure that any related REQUEST FOR TRANSFER OF CREDIT forms have been completed and submitted to Admissions and Records or are attached to this form (substituted TSTC credit does not require a TRANSFER form).

Actual Course Taken	Number of Sem/Qtr Hours	Grade Received (enter "R" if Registered)	Year/Quarter Taken	Course Required by Current Major	Number of Sem/Qtr Hours

I request that these courses be substituted for courses required within this student's major/program curriculum and certify that the substitutions satisfy curricular and institutional requirements:

**NOTE:** Departments are advised to keep a copy of this completed form to avoid duplications.

Dept. Chair: \_\_\_\_\_

Date: \_\_\_\_\_

Student Record Staff \_\_\_\_\_

Student: \_\_\_\_\_

Date: \_\_\_\_\_

Process Date: \_\_\_\_\_

Cluster Chair: \_\_\_\_\_

Date: \_\_\_\_\_

Revised: 11/2008