

Course Substitution Form

School of Electrical Engineering and Telecommunications

Student Number: _____ Program Code: _____

Family Name: _____ Given Names: _____

The course you wish to enrol in:

Course Code	Course Name	Prefer tutorial class number	Prefer lab class number

You want to substitute the above course for : (tick a box)

- One L4 Professional Elective
- One L3 Elective Course
- General Education UOC: _____
- Substitute for a particular course: course code: _____ course name: _____
- Substitute for an old course: course code: _____ course name: _____

Reason for this substitution:

Previous substitutions done: Yes / No

If yes, course code: _____ course name: _____

Student's signature: _____ **Date:** _____

For office use only

Approval by Director of Academic Studies: Yes No

Comments: _____

Signature of Director of Academic Studies: _____ **Date:** _____

Student enrolled: Yes / No Student notified by e-mail: Yes / No

Name of School Office staff: _____ staff's signature: _____ Date: _____