

# The UNIVERSITY of MONTANA WESTERN COURSE SUBSTITUTION FORM

Students should discuss the need for a substitution with appropriate department faculty. Students are responsible for completing and submitting all documentation necessary to verify approval for variances from published degree/program requirements. **SUBSTITUTION – replacement of a specific required course by another approved course (course replacement only, differences in course credit must be made up).** Transfer courses must be college-level and completed at institutions accredited by an approved accrediting agencies.

**Instructions:** Print/write legibly; answer all questions and provide all information requested. Incomplete forms will be returned with no action. Substitution/waiver requests must be approved by applicable department faculty and the Division Chair Properly completed and approved forms, and supporting documentation, should be submitted to the Registrar's Office; deadlines (graduation) may apply. Contact the Registrar's Office for more information (406 683-7371). Sign and date the form Attach applicable documentation.

\_\_\_\_\_ (Student Name) \_\_\_\_\_ (Student ID or SSN) Which Montana Western catalog(s) are you following? \_\_\_\_\_  
 \_\_\_\_\_ (List catalog years, example 2009-10)  
 \_\_\_\_\_ Student Email

In the space below please provide information regarding the substitution(s) you are requesting.

**COURSE SUBSTITUTION**--Provide ALL necessary information; S-1 course below substitutes for R-1 UMW required course to the right, etc.

<p><b>Substitute course(s) I have completed:</b></p> <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>DEPT</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>CRSE #</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>COURSE TITLE</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>CREDITS</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>GRADE</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>COMPLETED AT**</u></th> </tr> </thead> <tbody> <tr> <td>S-1</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td> </tr> <tr> <td>S-2</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td> </tr> <tr> <td>S-3</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td> </tr> </tbody> </table> <p><small>**Name of college at which you completed the course listed; attach syllabi or course description as well as documentation verifying the accreditation status of the institution cited.</small></p>	<u>DEPT</u>	<u>CRSE #</u>	<u>COURSE TITLE</u>	<u>CREDITS</u>	<u>GRADE</u>	<u>COMPLETED AT**</u>	S-1	_____	_____	_____	_____	_____	S-2	_____	_____	_____	_____	_____	S-3	_____	_____	_____	_____	_____	<p>&gt;</p> <p>&gt;</p> <p>&gt;</p>	<p><b>Required course(s) for which I am requesting substitution or waiver approval:</b></p> <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>DEPT</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>CRSE #</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>COURSE TITLE</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>CREDITS</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>FACULTY APPROVAL*</u></th> </tr> </thead> <tbody> <tr> <td>R-1</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td> </tr> <tr> <td>R-2</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td> </tr> <tr> <td>R-3</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td> </tr> </tbody> </table> <p><small>*UMW course instructors must approve ALL substitution requests</small></p>	<u>DEPT</u>	<u>CRSE #</u>	<u>COURSE TITLE</u>	<u>CREDITS</u>	<u>FACULTY APPROVAL*</u>	R-1	_____	_____	_____	_____	R-2	_____	_____	_____	_____	R-3	_____	_____	_____	_____
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Instructor's rationale for approving substitution (use the back of this form if necessary):

\_\_\_\_\_ (Student Signature) \_\_\_\_\_ (Today's Date) REQUIRED APPROVALS:

Division Chair \_\_\_\_\_ Date \_\_\_\_\_

**Last Updated 09/2021**

The UNIVERSITY of MONTANA WESTERN  
**DEGREE REQUIREMENT WAIVER REQUEST FORM**

" Students should discuss the need for a waiver with appropriate department faculty or staff. Students are responsible for completing and submitting all documentation necessary to verify approval for variances from published degree/program requirements. **WAIVER – an exemption from a degree requirement (no credits awarded/recorded).**

**Instructions:** Print/write legibly; answer all questions and provide information requested. Incomplete forms will be returned with no action. Waiver requests must be approved by applicable department faculty and the Division Chair. Properly completed and approved forms, and supporting documentation, should be submitted to the Registrar's Office; . Contact the Registrar's Office for more information (406 683-7371). Sign and date the form Attach applicable documentation.

\_\_\_\_\_    \_\_\_\_\_    Which UMW catalog(s) are you following? \_\_\_\_\_  
(Student Name)    Student ID    (List Catalog Years)

\_\_\_\_\_   
Student Email

In the space below please provide information regarding the substitution(s) you are requesting.

<u>COURSE WAIVER</u>	<u>DEPT</u>	<u>CRSE #</u>	<u>COURSE TITLE</u>	<u>CREDITS</u>	<u>FACULTY APPROVAL*</u>

Explain the basis for the course waiver in this space:

OTHER DEGREE REQUIREMENT WAIVER Use this space to state the degree requirement you are requesting approval to waive:

<u>Student Explanation:</u>  	<u>Instructor rationale for approval:</u> X X X X X X X X X X X X
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UMW Department Faculty APPROVAL--\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_    \_\_\_\_\_  
(Student Signature)    (Today's Date)

REQUIRED APPROVALS:  
Division Chair: \_\_\_\_\_    Date: \_\_\_\_\_