



11711 Sand Canyon Road
 Yucaipa, CA. 92399-1799
 (909) 389-3372
www.craftonhills.edu

Course Substitution Request

All Sections Must Be Completed

Name: _____ Last _____ First _____ Middle _____ Student ID# _____

All notifications will be sent to your college assigned student e-mail address

Course substitutions are intended to allow degree requirements to be substituted with a similar course or when the required course has not been, and will not be, offered in a timely manner to allow the student to complete the degree requirements. Course substitutions are not to be used as an attempt to waive degree requirements or as a convenience mechanism. **ONLY 1 COURSE PER REQUEST**

STUDENT

A.A.
 A.A.-T.
 A.S.
 A.S.-T.
 CERT
 Program: _____
 Catalog Year: ____ / ____

SUBSTITUTED COURSE COMPLETED AT ANOTHER COLLEGE OR UNIVERSITY:
Attach transcript, if not on file with Admissions and Records. (Official Sealed Transcripts will be required.)
**Student are required to submit course description and syllabus or course outline.*

Required Course at CHC	Substitution Course	Grade	Qtr/Sem	Units	College Where Completed
			<input type="checkbox"/> Qtr <input type="checkbox"/> Sem		

SUBSTITUTED COURSE COMPLETED AT CRAFTON HILLS COLLEGE:

Required Course	Substitution Course	Grade

 (Student Signature) _____ (Date)

FACULTY CHAIR

Department Chairs are allowed 10 business days to complete this request. If the Chair is unable to complete the request within 10 business days, it can be forwarded to the Dean, whom has 5 additional business days.

Approved Denied

(Chair or Designee Printed Name)

(Chair or Designee Signature) _____ (Date)

Department

ARTICULATION

A.A.-T. and A.S.-T. Program Requests ONLY

A.D.-T. Degree applicants are required to receive additional approval from the Crafton Hills College Articulation Officer to ensure the substituted course meets all appropriate requirements for transfer to the California State University system.

Approved Denied

(Articulation Officer Signature) _____ (Date)

OFFICE USE

Comments: _____

Processed by: _____ Date: _____

Records Evaluator Received By: _____

Rev 11/19 A&R Date: _____



COURSE SUBSTITUTION INSTRUCTIONS

Course substitutions are intended to allow degree requirements to be substituted with a similar course or when the required course has not been, and will not be, offered in a timely manner to allow the student to complete the degree requirements. Course substitutions are not to be used as an attempt to waive degree requirements or as a convenience mechanism.

STEPS TO SUCCESSFULLY SUBMITTING YOUR SUBSTITUTION REQUEST

1. It is highly recommended that the student meet with a counselor to review the Course Substitution process.
2. Submit the Course Substitution Request to the Department Chair for review.
3. Submit completed and signed form to Admissions & Records (CCR-111, or Evaluations@craftonhills.edu).*
4. If necessary, Admissions & Records will submit the Substitution Request to the Articulation Officer for A.D.-T. recipients.

Questions regarding the Course Substitution process should be directed to your counselor. Questions regarding the graduation process should be directed to Admissions & Records.

*EMAIL INSTRUCTIONS

Completed course substitution requests may be submitted to Admissions & Records by email.

Department Chairs and Deans: You may submit this form to Evaluations@craftonhills.edu.

It must come from your SBCCD assigned email to validate your signature.

It is recommended that you CC the student at their SBCCD assigned email.

Students:

You may submit this form to Evaluations@craftonhills.edu.

It must come from your SBCCD assigned email to validate your signature.

All correspondence will be sent only to your SBCCD assigned email.

A Campus of the San Bernardino Community College District

11711 Sand Canyon Road – Yucaipa, California 92399-1799 – (909) 794-2161

<http://www.craftonhills.edu>