

UNIVERSITY OF NORTH DAKOTA

Return to: **Office of the Registrar • 264 Centennial Drive Stop 8382 • Grand Forks, ND • 58202-8382**

Phone: (701) 777-2711 • Fax: (701) 777-2696

Student (Last, First, MI) _____

ID # _____ Major _____

Catalog Year _____

Course Substitution or Equivalency Request

Substitution: Acceptable in lieu of a required course

Waiver: Waives a specific required course

Course requested (Subject and Catalog #)	Institution/College (Where completed)	Required Course (from degree rqmts) (please include *R LN #)	Mark S or W for Substitution or Waiver
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Requirement number and Line number

Department Chair/Dean signature

Date
