GRADUATE REQUEST FOR UCSB COURSE SUBSTITUTIONS FORME

This form is to be used in order to request for the substitution of a course offered outside the Department for a Department Graduate Elective

Name:		Perm #	
Phone:		e-mail:	
Thome.		· · · · ·	
Status:			
• MA/PhD enrolled	• MA completed	 Advanced to Candidacy 	o ABD
Requirement governing the p o MA	o PhD		
Student's chosen sub-fields			
A. # of graduate sub-field elect	ives offered in the department d	uring the period under consideration	n
B. # of graduate sub-field elect C. # of graduate sub-field elect D. # of graduate sub-field elect E. # of uncontested sub-field el E = B - (A - 1) =	ves taken in the Department ives petitioned ectives that may be petitioned, o	computed as:	
If D is greater than E, then a memo of justification is necessary along with the faculty advisor's signature. If D is less than or equal to E, neither memo nor signature is required.			
Non-departmental course to be Department Course name and num			
Grade		ourse taken.	
Student Faculty advisor's si			
0000000	~~~~~		
Faculty Graduate Committe Comments from the Commi	e: Approved Aptroved	pproved with Conditions Denied	
Faculty Graduate Advisor	Date	-	
Final Action by Department Comments from Department		_ Approved with Conditions Den	ed
Department Chair	Date		
1			

Please return to the Chicana and Chicano Studies Graduate Affairs Office in South Hall 1722.

¹ Faculty signature does not approve the request; it only attests to consultation with the petitioning student.