DUS Permission Form

Course Substitution

Student Name:

Student SID:

Term Requested: Class of: Date Requested:

Major: _____

I am requesting Course #   Course Title:

be substituted to fulfill the requirement for

Justification:

Course Syllabus Attached

Student Signature:

Degree Audit Exception:

DUS Approval:

DUS Comments:

*Please save and rename this form as "Yourlastname_DUS Perm.pdf". Then submit via email (with course syllabus) to MCDB Registrar at andrea.chamba@yale.edu

Student to receive signed copy post DUS review.