SCHOOL OF ENVIRONMENT AND NATURAL RESOURCES
Course Change Petition

Name: ____________________________________ Student ID No.: ____________________________
OSU E-Mail: _______________________________ Phone: _________________________________
Major, Specialization: ______________________ Expected Graduation Term/Yr: ______________
Faculty Advisor: ___________________________ Academic Advisor: ________________________

Only one substitution per form

<table>
<thead>
<tr>
<th>Substitution</th>
<th>Requirement (Course or Category)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dept. Course No. Course Title Credit Hrs</td>
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</tbody>
</table>

*Faculty advisor approval not needed for GE course substitutions.

Reason substitution needed: □ course conflict □ required course not offered before graduation
□ required course full □ other: __________________________________

Explanation of why substitution is appropriate: __________________________________________

__________________________________________________
__________________________________________________

Signature: ________________________________
Student Date ________________________________

Required attachment: □ Syllabus of substitution course

Faculty comments*: _________________________________________________________________

__________________________________________________
__________________________________________________

Signature*: ________________________________
Faculty Advisor Date ________________________________

Please return signed petition to the SENR Academic Office in 210 Kottman for final approval and processing.