

**Application for Substitution of Minor Course**

Notes to Applicants

1. Please TYPE and PRINT and then SIGN on the form.
2. Students may use this form to apply for using another relevant course to substitute a required core or elective course which they are not able to take in a minor.
3. Students may apply for course substitution only when they are at Year 3 or Year 4.
4. Students must submit this form to the office of the Faculty offering the Minor before the substitution course is taken or within the first week of the semester when the course is offered. Students should not assume that the substitution would automatically be approved before receiving a confirmation approval from the Faculty Office.
5. Students may only submit at most two course substitution requests on this form.

**Student Information**

Student Name: Student ID No.:

Contact Phone No.: E-mail: @uowmail.edu.au

Programme (Major): Choose an item. Faculty: Choose an item.

Year admitted: Choose an item. Year of Study: Choose an item.

**Declaration**

I wish to apply for course substitution in the minor of Choose an item.

|  |  |
| --- | --- |
| Proposed substitute course | Original required course |
| Course code | Course title | Course code | Course title |
|  |  |  |  |
|  |  |  |  |

Reason(s): Click or tap here to enter text.

Date

|  |
| --- |
| Signature of Student |

|  |
| --- |
| Click or tap to enter a date. |

**Personal Information Collection Statement**

1. The personal data provided on this form will be used for the purpose of processing this application. All information provided will be destroyed when the whole process is completed.

2. Information provided on this form may be transferred to other academic/administrative units within UOWCHK for consideration and granting approval, where applicable.

**(FOR OFFICE USE ONLY)**

**Approval by Faculty offering the Minor**

 Course substitution approved.

Remarks**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Course substitution NOT approved.

Remarks**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signed by Leader of Minor Endorsed by Dean/ Associate Dean of Faculty Date

**Upon decision made by the Dean/ Associate Dean, please pass the form to Academic Registry.**