



PETITION FOR COURSE SUBSTITUTION

1. Submit official transcripts of course taken to University Admission and Records Office. Transcripts from CSUDH are not needed.
2. Attach catalog course description and/or course syllabus from the school the course was completed. Use one form per course substitution request.
3. Fill out student information:

First Name _____ Last Name _____
Student ID _____
Address _____
City _____ State _____ Zip Code _____
Home Phone _____ Day Phone _____

4. Which course offered at CSUDH MPA Program is the course substituting?

Course Title _____
Course Number _____ Units _____

5. Which course have you previously taken or will take which you would like to substitute?

Course Title _____
Course Number _____ Units _____
Name of institution _____
When (Term and Year) _____ Grade _____

6. Please sign to confirm that the above information is true to the best of your knowledge.

Signature _____ Date _____

7. Submit form to MPA Coordinator at mpaonline@csudh.edu.

FOR OFFICE USE ONLY

Approved _____ Denied _____

Comments:

By: _____ Date _____

Director Dean