



Course Substitution

453.03

Instructions: This form is to be used by undergraduate or graduate students who wish to substitute one Criswell College course for another. Please print and return completed form with all signatures to the Registrar's office.

Please Print Clearly

Full Name: _____

Student ID Number (last 5 digits): _____

Program Director: _____

Degree: _____

Semester: _____

I am requesting to substitute the following course(s)					
Required Course			Requested Substitution		
Course ID	Course Title	Credit Hrs.	Course ID	Course Title	Credit Hrs.
Ex. SCI 100	Ex. Introduction to the Sciences	Ex. 3	Ex. SCI 206	Ex. Biology I	Ex. 3

Explanation (required): _____

Required Signatures (must be signed in the following order):

Student:

Signature

Date

Program Director:

(see list on back page)

Signature

Date

Registrar:

Signature

Date

OFFICE USE ONLY

Entered in SONIS: _____ Date: _____

PROGRAM	PROGRAM DIRECTOR
Associate of Arts	Dr. Kevin Warstler
Bachelor of Arts Biblical Studies	Dr. Kevin Warstler
Bachelor of Arts Church Planting & Revitalization	Dr. Scott Bridger
Bachelor of Arts Christian Ministry	Dr. Scott Bridger
Bachelor of Arts Ministry	Dr. Scott Bridger
Bachelor of Arts Philosophy, Politics, & Economics	Dr. Brandon Seitzler
Bachelor of Arts Psychology	Dr. Steve Hunter
Bachelor of Science Education	Dr. Vickie Brown
Master of Arts Christian Leadership	Dr. Scott Shiffer
Master of Arts Christian Studies	Dr. Scott Shiffer
Master of Arts Counseling	Dr. Steve Hunter
Master of Arts Theological & Biblical Studies	Dr. Christopher Graham
Master of Divinity	Dr. Christopher Graham