

## Faculty Student Services - Unit Substitute Form for Core & Optional Units

This form will be retained as an official record of a request for unit substitution within a particular course/major or stream and the approval or non approval of this request.

Appropriate reasons for the approval or non approval of the unit substitution must be provided to ensure that any modifications requested are academically defensible. In approving unit substitutions it is expected that the course learning outcomes and unit learning outcomes are considered. This form may be used where RPL is not granted within a course but a unit substitution is offered as an alternative to the required unit.

**Student ID:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Course Title:** \_\_\_\_\_

**Major Title:** \_\_\_\_\_

<b>Current Unit:</b> (This unit will be removed from the student's study plan and replaced by the substitute unit if approved by the Course Coordinator).		<b>Substitute Unit:</b>	
<b>Unit No</b>	<b>Unit Name</b>	<b>Unit No</b>	<b>Unit Name</b>
<b>Reason for Substitution</b> <input type="checkbox"/> Unit no longer offered <input type="checkbox"/> Other (please specify) <input type="checkbox"/> Unit already completed			
<b>Course Coordinator Signature:</b> _____		<b>Date:</b> ____/____/____	

<b>Current Unit:</b> (This unit will be removed from the student's study plan and replaced by the substitute unit if approved by the Course Coordinator).		<b>Substitute Unit:</b>	
<b>Unit No</b>	<b>Unit Name</b>	<b>Unit No</b>	<b>Unit Name</b>
<b>Reason for Substitution</b> <input type="checkbox"/> Unit no longer offered <input type="checkbox"/> Other (please specify) <input type="checkbox"/> Unit already completed			
<b>Course Coordinator Signature:</b> _____		<b>Date:</b> ____/____/____	

<b>Current Unit:</b> (This unit will be removed from the student's study plan and replaced by the substitute unit if approved by the Course Coordinator).		<b>Substitute Unit:</b>	
<b>Unit No</b>	<b>Unit Name</b>	<b>Unit No</b>	<b>Unit Name</b>
<b>Reason for Substitution</b> <input type="checkbox"/> Unit no longer offered <input type="checkbox"/> Other (please specify) <input type="checkbox"/> Unit already completed			
<b>Course Coordinator Signature:</b> _____		<b>Date:</b> ____/____/____	

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

I agree to the modifications listed above and request that my study plan be updated

### FSSO Use Only

**Processed on Student Study Plan by:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Entered in Student Comments by:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_