

## **PROGRAM II**

## **Course Substitution Form**

Student's Name	
ID Number	
Email Address	
Phone Number	
Advisor's Name & ID Number	
Advisor's Email Address	
Advisor's Phone Number	
Original Course Name & Number	
New Course Name & Number	
Reason for Substituting Course	
Why Is this a Good Substitution	
When Will the Course Be Taken	
How Many Previous Substitutions Have You Had	
Please send this form to your advisor who is asked to complete the section below:	
Have You Discussed this Change with Your Program II Advisee?	
Does this Course Substitution Remain in Line with the Original Goals/Learning Objectives of the Advisee's Program II Application?	
Do You Approve This Substitution?	
Once the Advisor answers the questions above, this form should be sent to the Program II  Coordinator at program  @duke.edu	