



Office of the Registrar
 Valdosta State University
www.valdosta.edu/academics/registrar
 (229) 333-5727

UNDERGRADUATE COURSE SUBSTITUTION FORM

Section A: Student Biographical Information

Last Name

First Name

Middle Initial

Date

VSU ID Number

Department

Major

Anticipated Graduation Date

Is the student enrolled?
 Entering Freshman?
 Transfer Student?

Course(s) to Substitute for Course #1:

Prefix/Number & Course Title	Institution where the course was completed	Grade	Semester/Year Completed	Credit Hours	*VSU CORE Area A-F (if applicable)