Students must petition the department chair for any program substitutions not previously approved for all geology majors by the faculty. See your advisor if you have questions about blanket substitutions.

Petition for Geology/Geological Engineering Degree Program Substitution

To: Chair, Dept of Geology an	d Geologica	ll Engineering		
From:	Date:			
Anticipated graduation date: _	Dec	May Year	:	
Your program/specialization: _		Your ad	visor:	
I proposed to substitute the foll (Note: If requesting substitution of Geol/			s' rather than specifyii	ng courses.)
Required course name and #	Credits	its Substitution course name and #		Credit
Justify your request. Be comp	iete and spe	ciric as to reasons	tor this petition.	
Student signature:			Date:	
Advisor Approval: I have discussed this petition with the	student and s	apport this request.	Date:	
Name:	Advisor Sig	gnature:		
Department Chair Approval I have reviewed this petition and approve this request.			Date:	
Name:	Dept Chai	r Signature:		

Signed approvals must be placed in the student's folder in the department office. Students should keep a copy for their records as well.