Updated 1/28/2010

Oregon Institute of Technology Course Substitution Form

Student ID _____ Last Name _____ First Name _____ Graduation Date _____ Petitioned for graduation Y/N _____

Address _____ City _____ State _____ Zip Code _____

OIT Requirement				Substitution Requested					
Course Prefix	Course Number	Course Title	Credits	Course Prefix	Course Number	Course Title	Transfer Institution	Credits	Update Equivalency for future transfers *
Ex: PSY	201	Psychology	3	PSYCH	101	General Psych	Lane CC	3	
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*Only check if the course used for substitution is equivalent to an OIT course. This will permanently change course articulation tables from that institution for all students. Please contact Transcript Evaluator at 541-885-1302 if you have any questions.

To be accepted, this form must be completed in its entirety by appropriate advisor, and approved by the appropriate department chair BEFORE being submitted to the Registrar's Office.

Reason for Substitution(s): _____

_____

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_____

Recommended by Advisor's signature _____

Approved by Department Chair's signature (student's major) _____

Approved by Academic Area Chair's signature (Gen Ed courses) _____

☐ Approved ☐ Denied

_____
Registrar's Office Date