

NEW MEXICO HIGHLANDS UNIVERSITY  
**GRADUATE COURSE SUBSTITUTION/ADDITION/DELETION FORM**

Name: \_\_\_\_\_ Student ID: @ \_\_\_\_\_

Graduate Program: \_\_\_\_\_ Concentration/Emphasis: \_\_\_\_\_

**Substitute Course(s)**

Course Number and Title	#CR		Course Number and Title	#CR
_____		FOR	_____	
_____		FOR	_____	
_____		FOR	_____	
_____		FOR	_____	

**DELETE COURSES:**

**ADD COURSES:**

**REMARKS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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**APPROVED:**

Advisor(s): Major \_\_\_\_\_ Concentration/Emphasis \_\_\_\_\_

Graduate Coordinator/Department Chair: \_\_\_\_\_ Date: \_\_\_\_\_

Graduate Coordinator from Concentration/

Discipline for which substitution is requested: \_\_\_\_\_ Date: \_\_\_\_\_

College/School Dean/School Director: \_\_\_\_\_ Date: \_\_\_\_\_

Office of Graduate Studies Dean: \_\_\_\_\_ Date: \_\_\_\_\_

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Date Received by Office of Graduate Studies: \_\_\_\_\_

Date Sent to Registrar's Office: \_\_\_\_\_

Date Received by Registrar's Office: \_\_\_\_\_