



**CALIFORNIA INSTITUTE OF TECHNOLOGY**  
Chemical Engineering Option

**Course Substitution / Track Elective / Waiver of Prerequisites /  
Allowance of Credit Request Form**

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Track (select): \_\_\_\_\_ UID: \_\_\_\_\_

Advisor: \_\_\_\_\_ Year of Study (select): \_\_\_\_\_

**Course Substitution / Track Elective Request:**

Course Number/s <i>(if elective request)</i>	Requested Substitution/s <i>(if substitution request)</i>	Remarks/Satisfies

**Waiver of Prerequisite Request:**

Course Number	Prerequisite course/s:	Instructor	Instructor's signature	Remarks

**Allowance of Credit Request:**

Name of Institution from which credit was granted: \_\_\_\_\_

This student may be given credit for the subjects listed below on the basis of work completed at the institution named above. *If any special conditions are to be attached to this allowance of credit please note them in the "REMARKS" column.*

External Course Number/s	Internal Course Equivalent	# of Units granted	Remarks/Satisfies

**Note:** Allowance of credit requests must also be approved by the Registrar. Please take this completed and signed form to the Registrar's Office.

**Approved by (check one):**

Executive Officer

Option Rep

Signature & date: \_\_\_\_\_

Please return this signed form to the Registrar.