

## **School of Professional Development (SPD)**

## SPD Course Substitution Form

This *Course Substitution* form is for **SPD students**, only.

This form must be completed by students who seek approval for a course substitution in a SPD *Master's degree* or *Certificate program*.

Please print CLEARLY:				
Name:	Stony Brook ID #:			
Phone:	E-mail:		(Required)	
Please indicate the appropriate degree or o	certificate prog	gram in which you a	re matriculated:	
□ MAHEA □ MA/LS		$\Box$ MPS		
Advanced Graduate Certificate:				
Original course being substituted (e.g. 0	CEX 555 "Titl	e"):		
Substitute course for which approval is	sought (e.g. (	CEE 560 "Title"):		
Reason for substitution:				
STUDENT SIGNATURE			Date	_
For Office Use Only				
Program Director Name (Print):			Dept:	
Program Director Signature:			Date:	
	ved	Denied		
Mail, fax, or e-mail to:				
School of Professional Development (SI	P <b>D</b> )			
2321 Computer Science Bldg.		Fax: 631.982.7311		
Stony Brook University		Phone: 631.632.7050 Email: SPD@stonybrook.edu		
Stony Brook, NY 11794-4434		Email: SPD@stonybrook.edu		