Bachelor of Integrated Studies  
Contract Substitution Form

Student’s Name: ______________________  W # _________________________

Department granting the substitution: _________________________________

1. The student named above is currently contracted to take:

Prefix and course _____________ Course title: ___________________________

No. of credits: ________________ as part of the BIS course work in this area of emphasis.

2. S/he would like to replace above class with:

Prefix and course _____________ Course title: ___________________________

Reason for the change: _______________________________________________
_____________________________________________________________________
_____________________________________________________________________

As the department chair or student advisor, I agree to this change in the student’s BIS contract:

Signature: _____________________________________________

Date: ______________________________

Comments:

Please return this form to the BIS Department, Li 147.

Recorded by: ______________________________ Date: _____________________

(mec 5/2020)