



Course Petition Form

Name: _____

CU Student ID#: _____

CU Email: _____

Local phone: _____

Program (MS or PhD): _____

Class standing (e.g. junior): _____

Cumulative GPA: _____

Number of credits completed in Biomedical Engineering Program: _____

Course you would like to substitute: _____ Syllabus included? Yes ___ No ___

CU Boulder course you would like to count credit for: _____

What is your justification for requesting this substitution?

Approvals

Student Signature: _____

Date: _____

Graduate Chair Signature: _____

Date: _____

Program Coordinator Signature: _____

Date: _____