

## Request for Course /Credit Substitution

## **Course Substitution Policy**

In order to guarantee the acceptance of substitution course/credit, students at Olin College must receive approval from the Course Substitution and Transfer Board (CSTB). The CSTB will ask appropriate faculty to review the course materials before granting approval. Courses or credit substitution is defined as using a BBW course or a different Olin course to meet a course or credit requirement. Approved substitutions will be recorded on the Olin degree audit and retained in the student academic file.

There are two submission deadlines (1) The **33rd day** of instruction and (2) The **last day** of instruction of the semester. Hard-copy submissions are accepted at the Registrar's Office, CC 320. Questions regarding the CSTB can be sent to cstb@lists.olin.edu.

Student Name _				Student ID# _	
Major _	Major Expected Year of Graduation				
SECTION I: Host Institu	tion Informatio	n (Check one)			
Olin B	abson	Brandeis	Wellesley		
that if the preponderance answers are genuinely eq split credits will generally (1) What professi (2) From what di (3) Who teaches	veloped a set o of these question uivocal or divided be 2 and 2.) The ion is being practiscipline does the the course? In w	f questions to ask to ns indicate a particul d, the course might r se questions are: ticed by the students e course draw its sou	ar discipline, the cour- receive split credits. (In a? For what are they q rce material? Its pedag uctor's credentials? C	se should be who n the case of a 4 c ualified upon cor gogic practice an	
Host Course Number/Title	•				Credits
Т	erm Taken	<del> </del>			
Olin Equivalent Course Credit Requireme				· · · · · · · · · · · · · · · · · · ·	Credits
Other Olin Equivale (if splitting)	ent 				Credits
Faculty background/b	—include course pio and the title/a	descriptions from the descriptions descriptions descriptions the primary		- -	available. The more the better. elines above.
SECTION IV: Signatures	6				
Student				Date	
Advisor				Date	
For Office Use					Approval (Y/N)
ARB/Faculty Review				Date	