University of South Florida College of Educatiora@uate ^ µ ‰ % } Œ š K ((] COURSE SUBSTITUTIORM Instruction Sheet

To be completed only by the Academico Visor (or master's students) or the Major Professor (or advanced graduate students)

This form is used to amend courseworkisted on the approved Pogram of Study (P.O.S.) form. If us stitutions are being equested for more than three total courses while this program, please omplete a new P.O.S. form. The form should be completed by the Academic Advisor (for master's students) or the Major Professor (for advanced gaduate students).

Please note:

х Т

To be completed only the Academic Advisor (for master's students) or the Major Professor (for advanced graduate students)

Student Name						University ID Number			
Degree (Selectone) M.A.	M.A.T.	M.Œ.	M.S.	EdS.	Ed.D.	Œh.			
Program or Concentratio	n								
Advisor's Signature			_			ite	<u>. </u>		
5									
Director or Program Chairp	orcon's Si	anatura				uto.			
Difector of Program Chairp	6130113 3l	gnature			Da	ii.e			

Date

COEDU Graduate Support Offisegnature