## NDNU School of Education and Leadership

## CREDENTIAL PROGRAM COURSE SUBSTITUTION ("Waiver") FORM (Masters program participants: use <u>transfer</u> form, available at Registrar's Office)

Last Name		First Name	Telephone #	E-mail		
Program:	MS [	SS (Subject	)	MS) [Admi	in	
		\$	Substitution Based on Coursework	ζ		
NDNU course # or req. to be substituted	Units	Course used to meet requirement			Transcript attached?	Notes
		Course #	Description	University	Y/N	
Substitution Based on Experience						
NDNU Course # or req. to be substituted Units		Experience Summary Description (attach details)		Date(s)	Location	
D D						
Program Director Signature Date						
Dean's Signature Date						
Requirement program. Courses substituting TRANSFEF and have a	nts substi redential ostituted RRED to 7 year co	tuted for Credenti Programs are con DO NOT EARN N NDNU. <u>This form</u>	n(s) apply to credential programs ONL al will need to have the units made up I npetency-based (units are not required NDNU UNITS. Masters programs are u does NOT transfer units. Masters programs. See the registrar's office (650 grams.	by those conting to be transfe nit-based and rams require	inuing t rred to I require master	to a masters NDNU) and e units to be as level courses
Student Signature				Date		
		Do Noi	t Write Below This Line – For Office Use Only			<del> </del>
Date Received b	y Credential	Analyst	InitialDate to Registra	ur's		-