

## School of Health Sciences Substitution Request Form

A Substitution Request Form must be completed for each substitution course. Substitution Request Forms are specific to the degree program indicated below. **The correct major must be declared on MyCSN prior to submitting a Substitution Request Form.**

**Student NSHE ID:** \_\_\_\_\_

**First Name:** \_\_\_\_\_ **Middle Initial:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Catalog Year:** \_\_\_\_\_ **Degree:** \_\_\_\_\_  
(Choose from the options on page 2.)

**Academic Plan:** \_\_\_\_\_  
(Choose from the options on page 2.)

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**Required CSN Course:** \_\_\_\_\_  
(Prefix) (Course Number) (Course Title) (Credits)

**Substitution Course:** \_\_\_\_\_  
(Prefix) (Course Number) (Course Title) (Credits)

Where and when was the **substitution course** completed?

**Institution:** \_\_\_\_\_

**Semester:** \_\_\_\_\_ **Year:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

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ALL of the following documents must be attached individually as a PDF or DOC (Word) in order to complete the substitution request:

\*CSN Unofficial Transcript (REQUIRED)

\*CSN Degree Sheet from the correct/declared Course Catalog's year (REQUIRED)

\*Course Description from the incoming institution's Course Catalog for the year the course was completed (REQUIRED)

- Must include the front cover of the school's catalog, copy of accreditation page, and course description.

CSN Transfer Credit Report

- **Only required for courses transferred in from other institutions**

Note: Additional documentation may be requested in order to process this form. **NO PHOTOS WILL BE ACCEPTED.**

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Completed forms and required documentation can be emailed to the department for your Academic Plan (see page 2).

## School of Health Sciences Substitution Request Form

Use the following list to fill out the **Degree** and **Academic Plan** options above:

| Degree                       | Academic Plan  | Contact                   |
|------------------------------|--|---------------------------|
| Bachelor of Science          | Dental Hygiene   | Alma.Pineda@csn.edu       |
|                              | Nursing (RN to BSN Bridge)                             | NursingDepartment@csn.edu |
| Bachelor of Applied Science  | Cardiorespiratory Sciences                             | Joshua.Densford@csn.edu   |
|                              | Medical Laboratory Scientist                           | Alma.Pineda@csn.edu       |
| Associate of Applied Science | Diagnostic Medical Sonography – Cardiac/Vascular Track | Joshua.Densford@csn.edu   |
|                              | Diagnostic Medical Sonography – General/Vascular Track | Joshua.Densford@csn.edu   |
|                              | Health Information Technology                          | Joshua.Densford@csn.edu   |
|                              | Medical Laboratory Technician                          | Alma.Pineda@csn.edu       |
|                              | Nursing (LPN to RN)                                    | NursingDepartment@csn.edu |
|                              | Nursing (RN)   | NursingDepartment@csn.edu |
|                              | Ophthalmic Dispensing                                  | Alma.Pineda@csn.edu       |
|                              | Physical Therapist Assistant                           | Alma.Pineda@csn.edu       |
|                              | Radiation Therapy Technology                           | Alma.Pineda@csn.edu       |
|                              | Surgical Technology                                    | Joshua.Densford@csn.edu   |
| Veterinary Nursing           | Joshua.Densford@csn.edu                                |                           |
| Certificate of Achievement   | Dental Assisting                                       | Alma.Pineda@csn.edu       |
|                              | Medical Assisting                                      | Joshua.Densford@csn.edu   |
|                              | Medical Coding   | Joshua.Densford@csn.edu   |
|                              | Medical Transcription                                  | Joshua.Densford@csn.edu   |
|                              | Practical Nursing (LPN)                                | NursingDepartment@csn.edu |