

Mechanical Engineering  
Course Substitution Form

Date:\_\_\_\_\_.

Student Name \_\_\_\_\_ Student Number \_\_\_\_\_.

AESP or EMCH course number(s) and title(s) being petitioned:

\_\_\_\_\_.

Semester the course was completed: \_\_\_\_\_.

Course that it will be substituted for:

\_\_\_\_\_.

Reason for substitution:

Student Signature:\_\_\_\_\_.

Return this form to Renee Jenkins in the Mechanical Engineering  
Department [jenkinsr@cec.sc.edu](mailto:jenkinsr@cec.sc.edu) or 300 Main, A229

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Official Use Only

Undergraduate Program Director Signature:\_\_\_\_\_.

Department Chair Signature:\_\_\_\_\_.