

Request for Course Substitution Associate Degree Major Requirements/Certificate of Achievement

To: Articulation Of	ficer From:	 Name			Date:		
	est form is for students who have nrolled at Barstow Community	ve declared Ba				Iome Campus	
Student Information	on						
Student Name: Last Name First Name			Student ID #:				
Program Information	tion						
AA/AS/Certificate Major		Catalog Year:					
Institution Inform	ation (a separate form must be	completed for e	ach instituti	on attende	ed.)		
Institution Name: Unit Type:				Гуре:	Sem Qtr		
Accreditation Status: Or	nly coursework from U.S. regio	nally accredi	ted institu	ıtions will	be accepted.		
External Courses							
	er may be used to satisfy major recoetter by the sending institution.	quirements. Gra	ides of "P" r	may be use	ed to satisfy major	requirements if	
List course information below:					Articulation Officer Use Only		
BCC Course Requirement	Course Substitution	Term Completed	Units Sem/Qtr	Grade	Approved	Denied	
Ex. Auto 51A	Auto 25	Fall 2020	3.00	В			
Justification:							
Articulation Officer Signature:							
Instructional Faculty Signature:				 			
Admissions & Records Signature:					Date:		