



Chicano/Latino Studies Program
MICHIGAN STATE UNIVERSITY

Graduate Course Waiver/Substitution Approval Form

Name _____ APID _____

CLS PhD Student

CLS Graduate Certificate Student

A waiver substitution is approved for

CLS 810

CLS 811

CLS 893e

CLS 894

CLS 896

a substitution, the required class has been substituted with:

Class Number	Course Title	Semester	Instructor
--------------	--------------	----------	------------

Comments:

Approved by:

Major Professor (for PhD students)	Date
------------------------------------	------

Graduate Program Director	Date
---------------------------	------

Director, Chicano/Latino Studies Program	Date
--	------

College of Social Science	Date
---------------------------	------