



Department of Bioengineering

UNIVERSITY OF COLORADO
DENVER | ANSCHUTZ MEDICAL CAMPUS

Petition for a Core Class Substitution – MS & PhD

To allow sufficient review time and in case your petition is denied, it is strongly recommended that you submit your petition as soon as possible. Your advisor and the Graduate Affairs Committee must review and approve this petition.

Date: _____

Name: _____ Student ID: _____

Email: _____

Course you are requesting be used to substitute:

Course Name: _____ Course #: _____

Course Instructor: _____ Course Campus: _____

I am requesting that the above course does meet the following requirement (please circle one):

BIOE 5040: Research Methods BIOE 5041: Clinical Experiences BIOE 5020: Quantitative Core

BIOE 5000: Department Seminar

In a separate document, clearly state your request and reason for your petition. Please provide supporting documents that will help the committee make an appropriate decision (i.e. course description & syllabus with learning objectives). Petitions with incomplete information will not be considered.

I support the student's petition:

Advisor Name: _____

Signature: _____ Date: _____

Graduate Committee Review

Approved: Not approved:

Grad Committee Chair Name: _____ Date: _____

Grad Committee Signature: _____