



# Certificate/PhD Minor Course Modification

INSTRUCTIONS

1. Complete this form and save it as a PDF, using the filename LastName\_FirstName-CM-MOD.pdf
2. Email the completed PDF to che@mailplus.wisc.edu.
3. Print out a copy of the completed form, sign it, and obtain your CHE advisor's signature.
4. Mail or deliver the signed paper copy to:  
 Center for Culture, History, and Environment Bradley Memorial Building 203A 1225 Linden Dr. Madison, WI 53706  
 If you have questions, please email che@mailplus.wisc.edu or call 608-890-2050.

## 1 Student information

Student name  UW ID

## 2 Proposed modifications

Check if you would like to change your Track Option  New track option requested

Check if you would like to change your thematic sequence name  New proposed sequence name

Check if you would like to make course substitutions  You may make up to three course substitution requests below

|   | Department                                | Course no.           | Course title         | Semester             | Credit               |
|---|---|----------------------|----------------------|----------------------|----------------------|
| 1 | <input type="text"/>                      | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|   | This course replaces <input type="text"/> |                      |                      |                      |                      |
| 2 | <input type="text"/>                      | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|   | This course replaces <input type="text"/> |                      |                      |                      |                      |
| 3 | <input type="text"/>                      | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|   | This course replaces <input type="text"/> |                      |                      |                      |                      |

Check if you would like to change your CHE Advisor  New advisor's name  New advisor's email

## 3 Signatures

x \_\_\_\_\_ **SIGN HERE**  
 CHE advisor's signature Print name Date

x \_\_\_\_\_ **SIGN HERE**  
 Student's signature Date

### FOR OFFICE USE

Reviewed by Curriculum Committee on  Approved  Further action needed

Approved by CHE Director \_\_\_\_\_ x \_\_\_\_\_  
 Director's name Director's signature Date

- Copies  
 Nelson  
 CHE  
 Student