

Full name: \_\_\_\_\_ Hamline ID: \_\_\_\_\_ Phone #: \_\_\_\_\_

Anticipated graduation date (such as: May, 2023) \_\_\_\_\_

DEPT	COURSE	TITLE	GRADE	CREDITS	TERM/ YEAR	SUBSTITUTE COURSE*
<i>Five courses above 1120 chosen from the following (one may be taught in English):</i>						
GERM						
GERM						
GERM						
GERM						
GERM						
MODL	1010	The Language Phenomenon		4		
MODL	1020	Language and Society		4		

\*Department approval is required for transfer courses or other substitutions. Courses used as substitutions must be initialed by Department Chair.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (required)

Department chair/director signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (required)