

**Department of Child and Adolescent Studies (CAS)**  
**Course Substitution Petition - MAJOR**

Petition application checklist:

1. This completed Student Petition Form  
Only one request per petition will be accepted
2. **CURRENT** (no older than 1 week) Titan Degree Audit (TDA) [PDF Version]
3. Any other relevant documentation (financial statement/employment verification...)

Please note that petitions are thoughtfully reviewed but only granted in extreme, special case scenarios (not based on convenience, preference, etc.).

Submit requests via email to [casdepartment@fullerton.edu](mailto:casdepartment@fullerton.edu). Emails should have "petition" as the subject line and include all attachments as a single PDF file. Instructions are available on the CAS website at [hhd.fullerton.edu/cas](http://hhd.fullerton.edu/cas).

Responses will require at least two weeks. Students will be notified of outcome via email.

|                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                             |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Name (Print):                                                                                                                                                                                                                                                                                                                                                                            |  | CWID:                                                                                                                                                                                                                       |  |
| Email Address:                                                                                                                                                                                                                                                                                                                                                                           |  | Phone Number:                                                                                                                                                                                                               |  |
| Catalog year (found at the top of the TDA):                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                             |  |
| CAS Option/Concentration:<br><input type="checkbox"/> Early Childhood Education/Development (CHAC/CHAE)<br><input type="checkbox"/> Elementary Education/School Settings (CHAP/CHAS)<br><input type="checkbox"/> Adolescent/Youth Development (CHAY)<br><input type="checkbox"/> Family and Community Contexts (CHAF)<br><input type="checkbox"/> Development in Diverse Contexts (CHDC) |  |                                                                                                                                                                                                                             |  |
| Course or Topical Development Category to Replace                                                                                                                                                                                                                                                                                                                                        |  | Alternate Proposed Course                                                                                                                                                                                                   |  |
| Course will meet Major requirement:                                                                                                                                                                                                                                                                                                                                                      |  | <input type="checkbox"/> Core Course<br><input type="checkbox"/> Topical Development<br>(Specify Category if Applicable: _____)<br><input type="checkbox"/> Practicum<br><input type="checkbox"/> Other<br>(Specify: _____) |  |
| CAS Course Description:                                                                                                                                                                                                                                                                                                                                                                  |  | Alternate Course Description:                                                                                                                                                                                               |  |

Date Received: \_\_\_\_\_

Rev 7.7.2026

|                                                                                                              |                                                                           |                                                      |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------|
| <p>Have you filed any previous CAS dept petitions?</p> <p>Are you filing another petition with this one?</p> | <input type="checkbox"/> No<br><input type="checkbox"/> Yes (please list) |                                                      |
|                                                                                                              | What did you request (summarize)?                                         | Status of petition: Approved, Denied, or In Progress |
|                                                                                                              |                                                                           |                                                      |
|                                                                                                              |                                                                           |                                                      |
|                                                                                                              |                                                                           |                                                      |
|                                                                                                              |                                                                           |                                                      |

|                               |           |                                  |           |
|-------------------------------|-----------|----------------------------------|-----------|
| Units currently completed:    |           | Units in progress this semester: |           |
|                               | Next Term | Next Term                        | Next Term |
| Units enrolled/<br>planned:   |           |                                  |           |
| Courses enrolled/<br>planned: |           |                                  |           |

|                                |  |
|--------------------------------|--|
| <p>What is your rationale?</p> |  |
|--------------------------------|--|

|                                                                                                       |                         |
|-------------------------------------------------------------------------------------------------------|-------------------------|
| <u>CAS Petition Committee Only:</u> <input type="checkbox"/> Approved <input type="checkbox"/> Denied |                         |
| Signature _____                                                                                       | Date of Decision: _____ |