



Victoria Academy
Mens sana in corpore sano - A sound mind in a sound body

REQUEST FOR COMPULSORY CREDIT SUBSTITUTION

For Official Use Only

Students Name _____

Student's VA No.: _____ Student's OEN: _____

Student's Telephone: _____ Student's Email: _____

*A substitution is requested for the following **COMPULSORY** course:*

Course Code _____ Course Title _____

Reason(s) _____

Student's Signature _____ Date _____

Parent Approval:

Signature of Parent/Guardian _____ Date _____

Principal's Signature _____ Date _____