DNP PROGRAM OF STUDY FORM-ADDENDUM

Student Name:

Track:

Entering Year:

Planned Graduation Date:

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| **UW Course (number/name)***Ex. NSG 551 Health Politics and Policy* | **Substituted With (name of school, course number, name)***Ex. Global College POL 535 Health Law and Policy* | **Substitution Approved by DNPCC** **(Date Notified of Decision)** |
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