

Petition to **WAIVE A COURSE PREREQUISITE**

Name: _____ ID#: _____

E-Mail address: _____ Class: FR SO JR SR SP GR Major(s): _____
(circle one)

I request permission to enroll in the following course without having met all of the stated prerequisites:

Department: _____ Course Number/Section: _____ Title: _____ Credits: _____

Name of Instructor: _____ Semester: _____

Prerequisites which are not met: _____

Student's Signature: _____ Date: _____ Adviser's Name: _____

PLEASE OBTAIN THE FOLLOWING SIGNATURES FOR APPROVAL:

(Instructor of Course) (Date) Yes _____ No _____

(Department Chair of Course) (Date) Yes _____ No _____

Department Chairs may sign for instructors if they are in the same department.