

COURSE PRE-REQUISITE WAIVER FORM

Each student is responsible for ensuring that all pre-requisite courses are completed prior to the start of classes. This form must be submitted prior to the deadline for adding courses in the term or session. Submission of this form does not guarantee a waiver of any course pre-requisite. If your request is approved, you will be automatically registered for the course(s) listed.

Once this form is completed, or if you have any questions or concerns regarding this form, please email: reghelp@mi.mun.ca.

Student Name:

Student Number:

Program:

Course Selection Requested

COURSE ID CRN

Associated Pre-Requisite Course

CRN

Course ID

Approved Denied

Please make sure to include both lab and lecture CRN when completing this form

Rationale:

Students Signature

Date

Authorization:

Date:

Program Chair:

Date:

School Head:

REG-011-09-F1 Access to Information and Protection of Privacy: The information on this form is collected under the authority of the Memorial University Act (RSNL 1990 Chapter M-7) and is needed for and will be used to update your student record. If you have any questions about the collection and use of this information, contact the Office of the Registrar at miregistrar@mi.mun.ca.