# PRE-REQUISITE WAIVER REQUEST

**Waivers are only granted under extenuating circumstances**

Please submit completed form to the Undergraduate Advisor (cscadvisor@uvic.ca) - ECS 512

***Registration for approved waivers will be processed **AFTER** all students who have pre-requisites have had the chance to register.***

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**Part 1: To be completed by student**

Name: ___________________________  V#: ___________________________

Degree program: ______________________________________________________

Course for which waiver is requested: ___________________________  Term: ___________________________

Reason for request:

- [ ] Missing pre- or co-requisite course(s): ___________________________________________________________
- [ ] Program/Degree restriction  [ ] Year restriction
- [ ] Other ___________________________________________________________

Reason why the waiver should be granted:

__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

*(Attach relevant supporting documentation, such as proof of registration at other institution, transfer credit summaries, or unofficial transcript)*

Signature: ___________________________  Date: ___________________________

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**Part 2: To be completed by Undergraduate Studies Program Coordinator**

Waiver is  [ ] approved  [ ] denied

Notes:

Signature: ___________________________  Date: ___________________________

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**Part 3: To be completed by Advising Officer**

- [ ] Student notified  [ ] Banner updated

Initials: ___________________________  Date: ___________________________