

Department of Geography: Pre-requisite Waiver Form

STUDENT INFORMATION

Student Name:	
Student ID:	
Student Email:	

COURSE INFORMATION (OFFICE TO COMPLETE)

Course Code:	
CRN:	
Term:	
Course Instructor:	
Pre-requisites to be waived:	

WAIVER INFORMATION (OFFICE TO COMPLETE)

Waiver approved by:	<input type="checkbox"/> Course Instructor	<input type="checkbox"/> Undergraduate Advisor
Via:	<input type="checkbox"/> Email	<input type="checkbox"/> Other:
Date:		

STUDENT DECLARATION

I understand that by requesting and accepting this pre-requisite waiver, I hereby waive my right to late drop or grade appeals on the basis that I did not have all of the pre-requisites for this course.

Student Signature:	
Date:	