PREREQUISITE WAIVER FORM

Waiver Valid Only For Quarter Indicated Below

Course # ______ Course Title: ________________________________

Quarter (circle one) F W S SU Year 20____

Student Name____________ Student #____________

Has Been Granted Permission to Waive__________________
(List specific course(s) for which permission to waive is being granted)

Reason for Waiver____________________________________

Instructor Signature_________________________ Date ______

Chair Signature_____________________________ Date_______

Both Instructor and Department Chair signatures are required to waive any
established course prerequisite(s). This completed form with both signatures
must be turned in to the Anthropology/Sociology Undergraduate Advising Center
(Watkins 1141)

ATTENTION:

THIS FORM MUST BE RETURNED WITHIN THE FIRST TWO WEEKS OF THE QUARTER.