

REGISTRATION WAIVER

This form is used when requesting a waiver for a prerequisite/corequisite, permission to register for a course for which a time conflict exists, or requesting permission to register for a course you have already received credit for.

Student First Name

Student Last Name

Student Number

Semester

☐ Fall ☐ Winter ☐ Spring Year: 20__

Student Signature: _____ **Date:** _____

Prerequisite or Corequisite Waiver (for Grenfell course offerings only)

Subject	Course Number	Section	Instructors Signature	Program Chair Signature

Time Conflict Waiver (please include both courses)

Subject	Course Number	Section	Instructors Signature

Repeat Course Waiver

Subject	Course Number	Section	Registrar's Office Approval

For Office Use Only

Keyed by:

Date: