



SUNY Orange
Registrar

Course Prerequisite Waiver

Name of Student (Last, First, Middle Initial)	Student ID#: A	Date
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Program:

A PREREQUISITE FOR A CREDIT COURSE MAY BE WAIVED ON APPROVAL OF THE APPROPRIATE DEPARTMENT CHAIR

COURSE NUMBER & SECTION	COURSE TITLE
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PREREQUISITE

I REQUEST THAT THE PREREQUISITE FOR THE COURSE NAMED ABOVE BE WAIVED FOR THE FOLLOWING REASON:

STUDENT SIGN HERE 	DATE
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DO NOT WRITE BELOW THIS LINE * FOR OFFICE USE ONLY

<input type="checkbox"/> APPROVED	DEPARTMENT CHAIRPERSON'S SIGNATURE	DATE
<input type="checkbox"/> DISAPPROVED		