

## REQUEST TO WAIVE COURSE PREREQUISITE/CO-REQUISITE

**NOTE:** Waivers are given for specific course prerequisites or co-requisites only. The course waiver cannot be used to waive graduation requirements, nor does it generalize to other courses with the same prerequisite or co-requisite.

Date:  Student Number:   
Student Name:  Student Email:

**Course session** (ie. 2010W, Term 1):

**Course in which you wish to register:**

Course Name: (ie. Chem):  Course Number:  Course Section:

**Prerequisite course(s) for which waiver is being requested:**

Course Name: (ie. Chem):  Course Number:  Course Section:

**Corequisite course(s) for which waiver is being requested:**

Course Name: (ie. Chem):  Course Number:  Course Section:

**Reason for Request:** Transcripts, course descriptions and other relevant documentation must accompany the waiver request. Please use the back of this form if additional space is required.

Student Signature: \_\_\_\_\_

Professor Name: \_\_\_\_\_

Professor Signature: \_\_\_\_\_

**Note:** Please take form to Unit/Department Office for further processing.

Request Approved:  Request Denied:

Unit Head Signature: \_\_\_\_\_ Date

Reason for Denial:

**Approval entered in Comments and Notes on SIS by Unit Assistant**

Personal Information ("Information") provided on this form is collected pursuant to section 26 of the *Freedom of Information & Protection of Privacy Act (the "Act")*, R.S.B.C. 1996, c.165 for the purpose of processing your request to waive course prerequisite(s) or course co-requisite(s). The Information will be used and shared within UBC in accordance with the Act. Any questions regarding the collection of the Information may be directed to the Faculty of Health & Social Development, Human Kinetics - jennifer.rhodes@ubc.ca.