University of Arts & Science Academic Advising Lethbridge 4401 University Drive Lethbridge, Alberta, Canada T1K 3M4 Room M2102 Phone: 403-329-5106 Email: artsci.advising@uleth.ca

## Faculty of Arts & Science

## **Faculty of Arts & Science PREREQUISITE WAIVER**

I understand that I am responsible for registering myself in the	course.
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Today's Date:		Term Offered:	
Student Name:	(First and Last)	_ U of L ID #:	
Course you wish to take:	(i.e., ECON 2900)	Section Letter	5 Digit CRN (i.e., 30737)
Prerequisite(s) to be waive Rationale:	ed: (i.e., ECON 1010)		

Instructor:	(Printed Name)	(Signature)
Department Chair:	(Printed Name)	(Signature)
Student:	(Signature)	

## NOTE:

- 2 It is the student's responsibility to acquire the approval of **both** the instructor and Department Chair before submitting this form.
- : This form cannot be used to waive or substitute major, program, or degree requirements.
- : The student must ensure this waiver is submitted to Arts & Science Academic Advising before registering in the course.
- : Students without the appropriate prerequisite waived risk being dropped from the course without notice.
- 2 Registration in the course is dependent on space availability.