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University of Arts & Science Aca ethbridge 4401 University Dr				
Lethbridge, Alberta Room M2102	, Canada T1K 3M4			
Phone: 403-329-51				
Email: artsci.advisi	ng@uletn.ca			
	<b>Faculty of A</b>	rts & Scie	ence	
ty of Arts & Science	0			
Unde	ergraduate Pr	erequisi	le waiver	
I understand that	t I am responsible for re	gistering mysel	f in the course.	
Today's Date:		Term Offered:		
Today 3 Date.				
Student Name:		_ U of L ID #:		
	(First and Last)			
Course you wish to tal	ke:			
	(i.e., ECON 2900)	Section Letter	5 Digit CRN (i.e., 30737)	
Prerequisite(s) to be v	vaived:			
Rationale:		(i.e., ECON 1010)		
Rationale.				
la starrate a				
Instructor:	(Drinted Name)		(Circu et	
	(Printed Name)		(Signature)	
Department Chair:				
	(Printed Name)		(Signature)	
Student:				
	(Signature)			
NOTE:				

- before submitting this form.
- **1** 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.
- **!** Registration in the course is dependent on space availability.

Students requesting permission to complete a graduate level course without the published prerequisite(s) should visit the Prerequisite Waiver Form Portal.