PREREQUISITE/COREQUISITE WAIVER REQUEST

Student Name (print) ____________________________________________ NAU ID# ______________________

I wish to enroll in ___________________________ for the following term __________________ for which I lack one or more of the prerequisites or corequisites according to the present catalog.

Prerequisite(s) not completed with grades of C or better: ______________________________________________________

Corequisite(s) not completed with grades of C or better or not currently enrolled: __________________________________

Please read and check that you understand the following statements:

☐ I understand that the lack of the required prerequisites or corequisites may seriously hamper my ability to perform satisfactorily in this course.

☐ I further understand that completion of this course in no way relieves me of the responsibility for satisfactory completion of the above prerequisites or corequisites, including grades of “C” or better in prerequisites to engineering courses, in order to graduate.

☐ I also understand that the instructor of the course is under no obligation whatsoever to provide additional assistance or special instruction to help compensate for my lack of the required prerequisite or corequisite course.

Student’s Justification for Request (attach additional pages if necessary):

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

Instructor’s Comments: ____________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

Student Signature ____________________________________________ Date __________________

☐ Approved ☐ Not Approved Advisor Signature ____________________________ Date __________

☐ Approved ☐ Not Approved Instructor Signature ____________________________ Date __________

☐ Approved ☐ Not Approved Dept. Chair Signature ____________________________ Date __________

Original is to be kept in student’s file.