

Registrar's Office

Initials: Date:

Pre-Requisite Waiver Form – Kanbar CDEC College of Design, Engineering & Commerce Registrar's Office (East Falls) Email:

TJU_EF_Registrar@jefferson.edu

Student's Last Name:	Student's First Name
Student's Email:	
Student Campus Key:	Term: FL SP SM
Student's Program of Study:	
Advisor's Name:	
Catalog Year:	Anticipated Date of Graduation:
Completed signatures do not guarantee registration for the class. Please allow time for processing. Once the form is processed the student will be notified by email and can then register themselves for the course through BannerWeb. Students will not be able to register if they have any holds, time conflict with another course, the course is closed, incomplete forms or prior to their ticket time.	
Pre-Requisite Waiver Request for:	
Course Prefix and Number (e.g. Acct 10	2):
(Course(s) to be taken)	
Course Prefix and Number (e.g. Acct 10	2):
(Course(s) waived)	
Type of Waiver:	
Pre-Requisite Waiver (pre-requisite s	still required for graduation in program)
Pre-Requisite Waiver (pre-requisite t	vaived, taking course above for credit)
Pre-Requisite Waiver (with additional	al co-enrollment in a specific course)
New Required Co-Enrollment Course Name 8	z Title:
Comments:	
Advisor's Signature:	MAO or Authorized:
Email:	oignaturoi
Liliali.	Email: Justin:Opena@jenerson.edu Date:
2nd Approval (optional) Signature:	Email: