Faculty of Science
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Faculté des sciences
Faculty of Science

REQUEST FOR A PREREQUISITE/COREQUISITE WAIVER

Procedure:

1) Obtain approval and signature from the professor and the Chair of the Department of the requested course.
2) University of Ottawa students can provide an unofficial transcript from uOzone. Other students must provide an official transcript.
3) Return the completed form to the Office of Undergraduate Programs, Gendron Hall, room 172.

Section reserved to student:

Reason(s) for the request of a prerequisite/corequisite waiver:

_____
_____
_____

I, _____ (student's name), # _____, understand that by registering to the above-mentioned course without having completed the prerequisite/corequisite course(s), may require additional reading and/or independent study on my part.

_____ _____ _____@uottawa.ca
Signature of student Date E-mail address

Section reserved to professor and chair:

For the reason(s) outlined below, I approve that _____ (student's name), # _____, registers to _____ (course code), for the _____ session even though the prerequisite/corequisite course(s), has (have) not been completed.

_____ _____
Signature of professor Date

_____ _____
Signature of Chair Date

FOR FACULTY USED ONLY

Comment in student's file: _____

Signature of employee: _____ Date: _____