## UNDERGRADUATE STUDIES OFFICE FORM TO REQUEST FOR A PREREQUISITE WAIVER

## **SEG4910**

## **SOFTWARE ENGINEERING CAPSTONE PROJECT PART 1**

The request must be submitted to <u>bacinfo@engineering.uOttawa.ca</u>
(Consult the procedure on our web site <u>https://engineering.uottawa.ca/undergraduate-studies-office</u>)

Program of studies:  This Request applies to the following Term: FALL  2. COURSE INFORMATION (One requested course by for Requested course code:  Prerequisite(s):  3. SUPPORTING DOCUMENTS PROVIDED BY THE STUDE  Unofficial Transcripts  Justification Letter  Personalized Course Sequence (p.2)  Coop work Report or other	_ WINTER _ orm) (DGD):_	Year of study:SPRING/SUMMER	YEAR:
This Request applies to the following Term: FALL  2. COURSE INFORMATION (One requested course by form Requested course code: Section: (LAB): Prerequisite(s):  3. SUPPORTING DOCUMENTS PROVIDED BY THE STUDE  Unofficial Transcripts   Justification Letter   Personalized Course Sequence (p.2)	_ WINTER _ orm) (DGD):_	SPRING/SUMMER	YEAR:
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<ul> <li>□ Unofficial Transcripts</li> <li>□ Justification Letter</li> <li>□ Personalized Course Sequence (p.2)</li> </ul>	DENT		
☐ Justification Letter ☐ Personalized Course Sequence (p.2)			
☐ Personalized Course Sequence (p.2)			
• • • •			
□ Coop work Report or other			
Notice of Collection of Personal Information: In accordance Act of Ontario and with University Policy 90, your personal in of Ottawa Act, 1965. By submitting a prerequisite waiver following: I understand that approval of the request for a prenor does it guarantee me a space in the course. Furthermore the wait list since the enrolment system does not recognize the space availability and contact my faculty to submit an enroln I am permitted to enroll in this course, I may be required to do be able to justify a poor academic result based on not having	nformation in request, your requisite was a larger of the contraction	is collected under the authority ou understand, acknowledge aiver does not exempt me from nd that if the course is full, I can site waiver. It will be my respond if space becomes available. It is reading and/or independent s	y of the Universi and agree to the in the prerequisite innot be placed of insibility to monital understand that
SIGNATURE:FACULTY USE ONLY: CGPA: FIN/FSP:	_	DATE:	

PERSONALIZED COURSE SEQUENCE

## Instructions: Please indicate the grade, course rating and course mark.

STUDENT:		STUDENT NO:	
3 <sup>RD</sup> YEAR SUMMER	FALL	WINTER	
4 <sup>RD</sup> YEAR SUMMER	FALL	WINTER	
5 <sup>TH</sup> YEAR SUMMER	FALL	WINTER	