

Faculty of Science Office of Undergraduate Programs 172-30 Marie-Curie, Ottawa ON Canada K1N 6N5

Email: <u>infosci@uOttawa.ca</u>

## REQUEST FOR A PREREQUISITE/COREQUISITE WAIVER FOR COURSES OFFERED BY THE FACULTY OF SCIENCE

## **Procedures**

- 1) Obtain approval and signature from the course 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 **your** faculty for registration.

## **Section 1 (reserved for student)**

Student name:	Student No.:			
Course code:	Section:	Term:		
Missing Pre/Co-requisite(s) :_				
Reason(s) for requesting this p	rerequisite/core	quisite waiver:		
	ing completed tl	tial consequences) associated with in the prerequisite/corequisite course(and on my part.		
			@uOttawa.ca	
Signature of student	Date	E-mail ad	E-mail address	
Section 2 (reserved for	professor and	d chair)		
By signing below, I approve th corequisite course(s), has (have	-	the above-mentioned course even pleted.	though the prerequisite /	
Professor Name (printed)	Signat	ure of Professor	Date	
Chair Name (printed)	Signat	ure of Chair	 Date	
Section 3 (for Faculty	use only)			
Comment in student's file	□ PERC (	(Enrollment Requirement Roster	·) 🗆	
Signature of employee:		Date:		