

**RESTRICTED COURSE WAIVER FORM** (Not a prerequisite waiver)

Student Name \_\_\_\_\_ Student ID# \_\_\_\_\_

Term  Fall Semester  Spring Semester  Summer Session Year: \_\_\_\_\_

A restriction is placed on courses that cannot be taken for credit based on completion of similar credits taken in high school or college. To waive the course restriction, enter the course information and return this form to the Records Office with the instructor's signature during the first week of the term.

<b>Discipline</b>	<b>Number</b>	<b>Section</b>	<b>Course Title</b>	<b>Instructor's Signature</b>

**Student's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_