



PRE-REQUISITE WAIVER FORM (APM/MAT Courses only)

Application Deadline:	Date Application Submitted:
Surname:	First Name:
Student Number:	Cumulative Grade Point Average (CGPA):
Telephone:	E-mail:
Course(s) Requested: (APM/MAT)	Missing Pre-Requisite(s): (APM/MAT)

Please print and attach an unofficial copy of your transcript

Reason(s) for requesting the waiver:

I have attached an unofficial transcript printed from ROSI/ACORN:

Y Yes

No

Have you received other APM/MAT course waivers?

Yes

N No

List other waivers that you have received:

FOR OFFICIAL USE ONLY:

Date Reviewed: _____

Approved: ☐ Yes ☐ No

Approved By: _____
(Print)

Entered By: _____
(Print)

Signature: _____
