CFR PRE-REQUISITE OR CO-REQUISITE WAIVER FORM

Name		Major	Option	
MSU or Net ID	Local Phone Number		Student's E-mail Address	
I request that I be allow requisite or co-requisite Course:		pre- or co-requ	e without the required pre- uisite : Pre-/Co-requisite:	
Semester course is to be	e taken: Fall 201	Spring 201	Summer 201	
My reason for this requ	est (to be written by	the student):		

I understand that I will eventually have to complete the pre-requisite or co-requisite course, if required by the Department's curriculum to complete my degree.

Date

Student submits completed form and a current OASIS Curriculum Sheet from the Office of Academic Affairs (OAA) to the course instructor, for which the waiver is requested. The student will then need to add the class to their schedule.

Instructors in the Forestry Department will discuss the request with the student's instructor and advisor. The instructor and advisor will advise the Forestry Department Head on approval or denial of the request. The Forestry Department Head will sign the form, approving or denying the request, and will notify the student of the decision. Comments may be made on back of form. The Forestry Department Head will submit the form to the OAA to be maintained in the student's permanent record and for processing. The student will then need to add the class to their schedule.

_____Approved _____Denied

Department Head's Signature	Date
OSS USE ONLY: Logged in:	Date:

Instructor/Advisor Comments:

Recommendation of Course Instructor:	
Recommendation of Course instructor.	
Ammorrad	Danial
Approved	Denied
Recommendation of Student's Advisor:	
Approved	Denied
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