

## PETITION TO WAIVE PREREQUISITES

Student name: \_\_\_\_\_

Grade you will be in for this course: \_\_\_\_\_

Extracurricular activities/hours per week:

At school:

Outside of school:

Courses:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Course you are petitioning to take: \_\_\_\_\_

Prerequisite you are asking to waive: \_\_\_\_\_

Please explain why you believe you should be allowed to waive the prerequisite(s) for this course:

Parent signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Student, please submit this form to a teacher who has previously taught you a course  
in the department in which the petitioned course is being offered.*

Teacher:

- Petition Approved
- Petition Disapproved

Please explain decision:

Teacher signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Teacher, please forward this form to Administration.*

Administration:

- Petition Approved
- Petition Disapproved

Administrator's signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Administrator, please return this form to the Registrar.*