

ENGINEERING PERMISSION FORM

STUDENT NAME: _____ STUDENT NUMBER: _____

EMAIL ADDRESS: _____

PLEASE CIRCLE THE APPLICABLE SESSION: Fall/Winter Spring/Summer

Course Prerequisite Waiver

This approval is required if you do not have the academic prerequisites to register for a course or stay in a course.

Course prerequisites are found in the Course Section of the Undergraduate Calendar.

Course: _____

Instructor Name: _____
(please print name)

Instructor Signature: _____

Date: _____

Required Permission

This approval is required if the course for which you wish to register requires permission of the department.

Course: _____ Term: _____

DEPARTMENTAL AUTHORIZATION (Please Print NAME) _____
Dept Signature: _____

Date: _____

Term Unit Overload

The maximum number of units that can be taken per term is 21.

Number of units required above 21 Term 1: _____ Term 2: _____

PROGRAM: _____ LEVEL: _____

Name: _____ Dept Signature: _____
DEPARTMENTAL AUTHORIZATION (Please Print NAME)

Date: _____

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