

Special Registration Approval Request – Missing Prerequisite Approval

\_\_\_\_\_  
*Student Last*                      *First*                      *Middle*                      *Class Year*                      *Date*

\_\_\_\_\_  
*Majors(s)*                      *Minor(s)*                      *Advisor*

Course #: \_\_\_\_\_      Course Title: \_\_\_\_\_      Credit: \_\_\_\_\_  
*(Leave blank if unknown)*                      *(30 characters or less)*                      *(1/2 or 1)*

Instructor: \_\_\_\_\_  
*Print Name*                      *Signature*

Registrar: \_\_\_\_\_  
*Print Name*                      *Signature*

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

*Please return this form to the Registrar's Office.*

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*Majors(s)*                      *Minor(s)*                      *Advisor*

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Instructor: \_\_\_\_\_  
*Print Name*                      *Signature*

Registrar: \_\_\_\_\_  
*Print Name*                      *Signature*

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

*Please return this form to the Registrar's Office.*