

NEW MEXICO TECH – Pre-Requisite/Co-Requisite Waiver

Name _____ ID# _____ Semester _____ 20____
(Last) (First)
Email Address _____

I hereby give my **permission** for the above student to enroll in:

<u>CRN</u>	<u>Dept. Name & Course #</u>	<u>Section</u>	<u>Sem. Hrs.</u>
_____	_____	_____	_____

Student has not successfully completed the following pre-requisite/co-requisite(s): _____

All Signatures are required. (NO APINS)

Instructor Signature _____ (Date) _____

Advisor Signature _____ (Date) _____

Student Signature _____ (Date) _____

Dean of Eng. Signature _____ (Date) _____
For Engineering Courses Only

REVISED 12/2019