

Petition for Prerequisite Override Form

Student Information										
Last Name				First Name						
GWID				GW Email		@gwmail.gwu.edu				
SEAS Major/Field of study					Degree		□ B.A. □ B.S. □ M.S			□ Ph.D
Department			Semester/Yea	ar						
Subject		Course No.	Credit Hrs		Course Title			Instructor Name		
Prerequisite student lacks for entry into the course: Explanation (If additional space is needed, attach typed sheet):										
Instructor's Reason for Granting pre-requisite override (If additional space is needed, attach typed sheet):										
Required Signatures										
Student Signature	9							D	ate	
Instructor Decisio	n		Approve	☐ Disapp	rove					
Instructor Advisor	Signature					Last Name		D	ate	
Submit to Student Services and Advising Office for Associate Dean's Review										

For Advising Office Use Only

Submit forms to:

SEAS Student Services and Advising Science & Engineering Hall, Suite 2500 Undergraduate -seasadvising@gwu.edu Graduate - seasgrad@gwu.edu