COLLEGE OF MARIN

OFFICE OF ADMISSIONS & RECORDS

Prerequisite Exception Request Form

(Valid for College of Marin courses only)

MARIN ID #   **M**

NAME

LAST   FIRST   M.I.

E-MAIL ADDRESS

I am requesting a prerequisite exception to enroll in:

_____ , _____ **in Fall** .
COURSE / TITLE   CRN

I will be completing the prerequisite course:

_____ , _____ **in Summer** .
COURSE / TITLE   CRN

Procedure: 1. Enroll in the prerequisite course in summer.
2. Submit this form to the Office of Admissions and Records for enrollment in the Fall course.
3. An email confirmation of enrollment will be sent to you.

Example: Enroll in MATH 101 for the Summer Term. Complete the form requesting enrollment in CHEM 110 for the Fall Term and submit to the Office of of Admissions and Records.

I understand that if I do not satisfactorily complete the prerequisite class in Summer, I will be dropped from the subsequent Fall course.

_____   _____
STUDENT SIGNATURE   DATE