



RESTRICTED COURSE WAIVER FORM

(Not a prerequisite waiver)

Records Department
Room 2220, West Campus
3300 Century Avenue North
651.779.3299

Student Name _____

Student ID# _____

Term Fall Spring Summer

Year: _____

A restriction is placed on courses that cannot be taken for credit based on completion of similar credits taken in high school or college. To waive the course restriction, a "Restricted Course Waiver Form" with the instructor's signature must be received in the Records Office by the fifth day of the start of the Fall or Spring Semester, or the first three days of Summer Session.

Discipline	Number	Section	Course Title	Instructor's Signature

Student's Signature: _____

Date: _____

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