

**Biomedical Engineering** Molinaroli College of Engineering and Computing UNIVERSITY OF SOUTH CAROLINA

## **Prerequisite Waiver Form**

This form is required for requests to enroll in a BMEN course prior to completion of the prerequisites.

- Students should be aware that each request will be considered on a case-by-case basis.
- Relevant course syllabi and the student's transcript from my.sc.edu *must* be attached.
- Students must complete this process by the third class period of the course in question.
- The completed form is to be submitted to the instructor.

Tol	be comp	leted by	stude	ent

Student Name:

VIP ID:

Student Email Address:

Planned Graduation Date:

BMEN Course: (Include the Semester, ex: BMEN XXX Fall 202X)

Prerequisites Not Satisfied:

Why the Prerequisites are Not Satisfied:

What is being done to make up the necessary material:

Provide a concise description of what you have done to ensure that you will be prepared for the material in this class. Taking the pre-requisite as a co-requisite is not an acceptable approach.

	To be complet	ted by faculty (course	instructor)	
astructor's Recommendation:	□ Favorable	□ Unfavorable		
nstructor's Signature:			_ Date:	
After signing, please forward				
		<u>shaw@sc.edu</u> ) & cc I		
	to Kimberly ( <u>brad</u>	l <mark>shaw@sc.edu</mark> ) & cc [ BMEN Use Only		sc.edu
After signing, please forward t	to Kimberly ( <u>brad</u>	shaw@sc.edu) & cc E BMEN Use Only	or. Henrich ( <u>henrich@cec.s</u>	<u>sc.edu</u>