Academic Advising Center Confluence – Room 123 Campus Box 201 P. O. Box 173363 Denver, CO 80217-3363

Fax: 303-556-8555 Phone: 303-556-2481



PREREQUISITE WAIVER FOR INTERNATIONAL STUDENTS

Student Name (print):	
S#:	Phone#:
Email:	
Note: Your official CCD email	account is the only email CCD will accept for correspondence
involved in not taking the re to opt out of the prescribed international academic advi-	S#, have been fully informed of the risk ecommended pre-requisite course. I am making the decision pre-requisite courses that were recommended to me by my sor at CCD. Should I fail to complete the course with a "C sponsibility for this decision, which will be taken into or an academic appeal.
Failure to do so will place melow 2.0 in the subsequent Grades of F, I, SP or W or requirements have been con	S#, will make satisfactory progres program by maintaining a cumulative GPD of 2.0 of higher ne on academic probation. I understand that if my GPA fall t semester, I will be subject to academic dismissal from CCD does not count toward full-time enrollment even if coursempleted. I understand that repeating classes in which I have er will not count toward full-time enrollment.
Course Waived:	
Credit Hours:	Student/Advisor Initials:
Course Waived:	
Credit Hours:	
Course Waived:	
Credit Hours:	
Course Waived:	
Credit Hours:	
decided not to follow the above. Student Name (print):	involved in waiving prerequisite courses and I have ne placement recommendation for the courses stated
Student Signature:	Date:
of not completing the cou Advisor Name (print):	
Advisor Signature:	Date:
	waive Developmental Education prerequisites, and should not prerequisites. For example, a student cannot waive the BIO

111 course to register for BIO 112.