

X-ID #: _____



Lake Sumter
State College

Prerequisite Override Approval

This form must be presented prior to registration in order for an override to be entered.

Name: Last, First, MI

Phone Number

Email

- Check one: BAS AA-Degree Non-Degree
 AAS Degree- Electrical Distribution Tech
 AS Degree-Program of Study: _____

Select Term:	
<input type="checkbox"/> Fall	<input type="checkbox"/> Spring
<input type="checkbox"/> Summer A/AE	<input type="checkbox"/> Summer B
Year: _____	

Course Requested	CRN	Required Prerequisite	Approved	Not Approved

Explanation: (Check one)

- Transfer Student - completed prereq/coreq at previous college. (Attach copy of transcript)
 Took classes prior to 1984 - courses not updated in computer.
 Other. Please explain. _____

Student Signature

Date

- Approved Not Approved

Advisor or Instructor Signature

Print Name

Date

Dean Signature

Date