



Academic Approval – For waiver of Provisional Status

PERSONAL DETAILS

Student Number:	First Name:	Last Name:
Date of Birth:	Telephone:	Email:
Course Code:	Course Name:	Major:

PROVISIONAL SUBJECT WAIVER ONLY

This form is for students who wish to have the pre/co-requisites waived for a subject in which their enrolment status is provisional. **This form is not applicable to Graduate School of Medicine students.**

- List below the subject(s) you wish to waiver.
- Seek approval from the **Head of School / Academic Unit for each subject**. Please contact the faculty to determine the correct signing authority. <http://www.uow.edu.au/about/faculties/index.html>
- Return the completed application with the approval signatures to Student Central

Provisional Subject			Pre/Co Requisite to be waived	
Subject Code	Subject Name	Session of enrolment	Pre/Co Requisite to be waived	Head of School / Academic Unit Signature

STUDENT SIGNATURE

I understand that this waiver does not exempt me from having to complete the Pre/Co Requisite subject(s).

Student Signature:

Date:

Contact Student Central:	Office Use Only	Date Received	Date Processed
Building 17, Ground Floor, Northfields Ave, NSW 2522 Ph: 4221 3927 Fax: 4221 4322 Email: askuow@uow.edu.au			