



# COURSE PRE-REQUISITE OVERRIDE FORM

DIN: RUW-OR/REG-T-007

RN: 01

ED: 29/09/2024

**Please note:** If approved, you will only be registered for the selected course if places are still available at the time of registration by the Registrar's Office.

Student's name: \_\_\_\_\_ I.D. No.: \_\_\_\_\_

Academic year: \_\_\_\_\_ / \_\_\_\_\_ Semester:  1ST  2ND  SUMMER

Complete the details of the course for which you wish to register:

	Course code	Section	Course title
E.g.	BNF 405	01	Commercial Bank Management

Give details of the prerequisite course(s) from which you wish to be exempt:

	Course code	Section	Course title
1.			
2.			
3.			

Advisor Comment:

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Student: \_\_\_\_\_ / \_\_\_\_ / 20  
 Name (print) Signature Date (DD/MM/YYYY)

**Dean:** \_\_\_\_\_ / \_\_\_\_ / 20  
 Name (print) Signature Date (DD/MM/YYYY)

**Registrar:** \_\_\_\_\_ / \_\_\_\_ / 20  
 Name (print) Signature Date (DD/MM/YYYY)