

## REQUEST FOR COURSE PREREQUISITE WAIVER

### Procedure for getting approval

1. Fill-in the required information below
2. Bring this form to the course instructor that teach the class to ask for approval (faculty signature is required)
3. After your instructor has signed on your form, email this form to Associate Dean ([study@dula.edu](mailto:study@dula.edu)) for final review and approval
4. If approved, your name will be registered to the class in populi and you will be informed through email

### Student's Information

Student Name : \_\_\_\_\_ Student ID : \_\_\_\_\_ Date: \_\_\_\_\_  
Phone : \_\_\_\_\_ Email : \_\_\_\_\_ Quarter / Year : \_\_\_\_\_

Program :  MSOM  DATM  
Program Language :  English  Korean  Chinese

Course that you want to register (Name & Code) :

Prerequisite Course that you want to be waived (Name & Code) :

Provide the reason why the pre-requisite course waiver should be granted to you:

### Signature

Student's Signature : \_\_\_\_\_

Instructor's Name and Signature : \_\_\_\_\_

Associate Dean's Signature Name and Signature : \_\_\_\_\_