

Prerequisite Exemption Request

453.08

Instruction	ns: This form is to be used by underg Please print and return completed	raduate or grad I form with a	aduate stude ll signatures	ents who wish to request a prerequisite exemption. to the Registrar's office.	
Please Print C	Clearly				
Full Name:			Student ID Number:		
Program Director:			Degree:		
Semester: _					
	Lam requesting to	ho overnte	d from the f	Callavying proroquisits(s):	
Course Which Requires Prerequisites			d from the following prerequisite(s): Prerequisites for Which You Are Requesting Exemption		
Course ID			Course ID	Course Title	
Ex. SCI 101	Ex. Biology I		Ex. SCI 100	Ex. Introduction to the Sciences	
	1		<u> </u>		
Explanation (required):					
Required	Signatures (must be signed in the	following o	rder):		
-		8	,		
Student:		Signature		Date	
	ofessor (if fulltime faculty) or Program if course professor is adjunct faculty):	Signature		Date	
Registrar:					
Registrat.		Signature		Date	
		OFFIC	E USE ONLY		
	Entered i	n SONIS:	Date	:	

PROGRAM	PROGRAM DIRECTOR	
Associate of Arts	Dr. Sarah Spring	
Bachelor of Arts Biblical Studies	Dr. Kevin Warstler	
Bachelor of Arts Christian Ministry	Dr. Steven Sanders	
Bachelor of Arts Philosophy, Politics, & Economics	Dr. Brandon Seitzler	
Bachelor of Arts Psychology	Dr. Steve Hunter	
Bachelor of Science Education	Dr. Vickie Brown	
Master of Arts Christian Leadership	Dr. Jeff Campbell	
Master of Arts Christian Studies	Dr. Ty Kieser	
Master of Arts Counseling	Dr. Steve Hunter	
Master of Arts Theological & Biblical Studies	Dr. Ty Kieser	
Master of Divinity	Dr. Jeff Campbell	