

FORM A: Prerequisite Waiver Form

Name: _____
 Student ID: _____
 Telephone: _____
 Email: _____
 Major(s): _____
 Minor(s): _____

Office Use Only		
Issued:		
Returned:		
Decision:	Approved	Denied
Recorded:		
Notified:		

Semester & Year course will be taken: _____ Prerequisite(s) to be waived: _____
 Justification for waiver (i.e. concurrent enrollment, etc.): _____

One Course Per Form. Waive prerequisite(s) for the following PSYC class (i.e. PSYC 336):

Warning: Prerequisites are courses designed to provide students with a fundamental understanding of theories and concepts within a discipline and to academically prepare them for higher-level coursework in the same discipline. It is the Psychology Department's position that students who do not take the required prerequisite(s) will be seriously at an academic disadvantage when attempting higher-level courses. Therefore, waiver of prerequisite(s) will be granted for exceptional cases only and is subject to the final approval of the Psychology Department's Director of Undergraduate Studies. **Also, the University Policy on prerequisites, as stated in the USC Course Catalogue, is that: "a prerequisite course within the same discipline taken after the higher-level course has been passed will not be available for unit or grade point credit."**

*** The following students are exempt from this policy and should fill out the **"FORM B: Prerequisite Waiver for Pre-Approved Substitutions"** form before registering for the higher-level course:

1. Students who have the required scores on AP Psychology, IB Psychology or "A-Level" Psychology.
2. Students who have Psychology Department-approved substitutions for the prerequisite(s).
3. Students who have or will have taken the course at another institution that is articulated as being equivalent to the prerequisite, but such course is not yet in the student's STARS Report. Proof required.
4. Graduate students wishing to take a 400-level course for graduate credit.

*** Return completed form to the Psychology Department Front Desk in SGM 501**

I have read the above statements. I understand and accept the consequences of waiving the prerequisite(s) for the course(s) I wish to take.

Student's Signature: _____ Date: _____

Department Approval

 Instructor
 Instructor's Conditions for Enrollment: _____ Instructor's Signature _____ Date _____

 Director of Undergraduate Studies
 Director's Conditions for Enrollment or Reasons for Denial of Request: _____ Director of Undergraduate Studies' Signature _____ Date _____