



PRE-REQUISITE WAIVER FORM (APM/MAT Courses only)

Please submit requests to following emails:
1st and 2nd Year Course Requests (does not include MAT257/MAT267): 1styear@math.toronto.edu
APM & Upper Year Course Requests: math.undergrad@utoronto.ca

Surname:	First Name:
Student Number:	Cumulative Grade Point Average (CGPA):
Telephone:	E-mail:
Course(s) Requested: (APM/MAT)	Missing Pre-Requisite(s): (APM/MAT)

Please print and attach an **unofficial** copy of your transcript

Reason(s) for requesting the waiver:

I have attached an unofficial transcript printed from ROSI/ACORN:

Yes No

Have you received other APM/MAT course waivers?

Yes No

List other waivers that you have received:

FOR OFFICIAL USE ONLY:

Date Reviewed: _____

Approved: Yes No

Approved By: _____
(Print)

Entered By: _____
(Print)

Signature: _____