



UNIVERSITY OF CALIFORNIA, MERCED
Office of the Registrar

SUMMER ONLY
Requisite Override
Enrollment Form

5200 N. Lake Road, Merced, CA 95343 / Phone: (209) 228-7178 / registrar.ucmerced.edu

Personal Information

☐ Undergraduate ☐ Graduate

UCM ID Number _____

Last Name _____ First Name _____ M.I. _____

Email _____

If a course has requisite(s) that has not been met, use this form to obtain Instructor signature. Requisite(s) include course prerequisites or corequisites and major or class level restrictions. To confirm requisites for a course, go to registrar.ucmerced.edu/go/schedule. If you are a visiting student, you should first contact summersession@ucmerced.edu to determine if this is the correct form to use.

Obtain Instructor Signature on this form and return this form to the Students First Center during business hours by the established deadline: summersession.ucmerced.edu/important-dates.

If you are seeking a requisite(s) override for a course offered by the School of Natural Sciences or School of Engineering an additional signature from a School representative is required before returning this form to the Students First Center. You will receive an email from the School regarding the approval or denial of this request. If the School approves your requisite(s) waiver and it is prior to the 1st day of instruction, the email will include instructions to add the course online. If the School approves your requisite(s) waiver and it is the 1st day of instruction or after, pick up this form and return it to the Students First Center by the established deadlines.

Course Information

Summer Year: _____

Have you previously attempted and not passed the requisite(s): ☐ Yes ☐ No If yes, when was your last attempt: _____

Use the space below to explain how you plan to be successful in this course without meeting the requisite(s).

ADD	CRN	Sub	Crs	Sec	Units	Instructor Signature <i>I am allowing the student to enroll without the requisite(s) of the course</i>	Date	DROP	CRN	Subject	Course	Sec	Units

I understand that any changes in my course load may affect my financial aid, athletic or veteran eligibility. I accept responsibility for the accuracy of the information on this form and know I can verify my schedule through MyRegistration at any time.

Student: _____ Date: _____

School of Natural Sciences and School of Engineering Courses ONLY: *Students seeking an override for a requisite that has not been met should return this form first to the School (where the course is being offered) after obtaining the Instructor signature.*

School Designee: _____ Date: _____

Students First Center Use Only: Updated on: 03/15/2017

Total units after all changes: _____ Processed by: _____ Date: _____