

900 COLLEGE STREET | BOX 8425 | BELTON, TEXAS 76513 | (254) 295-4510 | REGISTRAR@UMHB.EDU

Corequisite Override Form

For: Semester: Ye	ear:
Please allowStudent name	() Student ID #
to register for the following class with a corequisite error:	
Course: Dept prefix Course # Sec	tion #
Please check or describe here why this waiver or override is being allowed:	
Student is currently in a corequisite course at another college or university	
Student has completed the corequisite course at another college or university, but it is not	
yet reflected on the student's transcript.	
Other (explain here)	
Program Coordinator	Date
Associate Dean	Date

After receiving the approval signatures, the student should bring this form to the Registrar's Office in order to register for the course with the corequisite error.

In situations that the Associate Dean is not applicable, the Dean will sign.