

PREREQUISITE OVERRIDE REQUEST

Psychology Department

Date: _____

Student: _____ Phone: _____

Student Number: G _____ Email: _____

Major: _____ Minor: _____

Course(s) you want to register for, e.g.; PSY 300	Semester/Yr	Section, if applicable	CRN Number, if applicable	Required Prerequisites (Circle any prerequisite that is blocking your registration)	Reason for Prerequisite Problem. See list below and enter the letter of the appropriate reason

Reasons:

A. I'm taking the prerequisite course at GVSU in the Spring session, and want to take the related course in the Summer session. **Attach a copy of your Spring Schedule.**

B. I've completed the prerequisite at another institution and it's showing on Banner, but I still can't register on-line. **Attach a copy of your Banner transcript or degree evaluation**

C. I have completed the prerequisite(s) through AP or CLEP testing (Circle which)
Attach a copy of your official score sheet.

Test(s) Taken: _____ Score: _____

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(The following minimal AP scores are required for the following course equivalencies:

PSY 101 – score of 4 or better STA 215 – score of 3 or better)

D. I've completed the prerequisite at another institution and it's not showing up on Banner – **List below and attach a copy of your transcript**

E. I'm currently enrolled in the prerequisite at another institution – **List below and attach official schedule which clearly indicates institution, semester and year.** If you cannot yet register for the course you intend to take, complete the "Intent to Take Prerequisite at Another Institution" form.

College/University: _____ If out-of-state, State: _____

Course at Institution	Semester/Yr Completed or Registered For	GVSU Course Equivalent
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dept:
 Course Equivalency was verified.
 Initials: _____

Other prerequisites were verified.
 Initials _____

F. Other. Please explain:

– Department Use Only –

Department Action: **Approved and entered into Banner** **Not Approved**

Date: _____ Robert W. Hendersen Date: _____ Sandy Portko Date/Time Email Sent: _____

_____ PRE _____ PAP (satisfied by AP test scores) _____ PO (satisfied at other institution)