

200 Arts Building
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Student name	
ID number	
Course 1 (name/number/section)	
Course 2 (name/number/section)	

I accept the responsibility of taking these courses concurrently. I understand that if I withdraw from the pre-requisite course, I must also withdraw from the requisite course.

X _____ Date: _____
Student signature

Approvals:

Instructor: _____ Date: _____

Instructor: _____ Date: _____

Academic Advisor: _____ Date: _____

Obtain approval signatures and return this form to the MLCS main office, Arts 200. Keep a copy or photo of this form for your personal records.