



# Class Enrollment Waiver

Instructions: To be used by students who wish class enrollment against advisement.

Name: \_\_\_\_\_ ID/SS#: \_\_\_\_\_ DOB: \_\_\_\_\_

**Student Educational Intent**

Technical Diploma

Associate Degree

Advanced Technical Certificate

Selected Courses

Program: \_\_\_\_\_

ASSET

COMPASS

ACT

\_\_\_\_\_ Writing

\_\_\_\_\_ Reading

\_\_\_\_\_ Numerical

\_\_\_\_\_ Elem Algebra

**Reasons for Exemption to Class Placement:**

**Student Request:**

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**Counselor Comments:**

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I understand that I am taking this course against the recommendation of my counselor/advisor.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_