Requesting a Prerequisite Waiver for a Department of Business Administration Course (ENTR, GMGT, HRIR, SGMT, LEAD)

- 1. The student may access the "Departmental Permission Form" from the Asper Undergraduate Program web site:
 - http://umanitoba.ca/asper/programs/undergraduate/academic-matters.html
- 2. The student must complete Section A. of the form.
- 3. The student must email their entire grade history (e.g. Aurora web transcript) along with the Departmental Permission Form to the Department Head, Dr. Parshotam Dass P.Dass@umanitoba.ca and copy the Department Assistant, Qiao Xu Qiao.Xu@umanitoba.ca on the email.
- 4. The student must e-mail Dr. Parshotam Dass, Head of the Department of Business Administration, with the details of the request and why they think they are justified to have the waiver. ****NOTE: The subject line of the email should read as follows: "Prerequisite Waiver."

Send the email to: P.Dass@umanitoba.ca

- 5. Dr. Dass will read the student's e-mail, look at the student's academic history, and decide whether the prerequisite waiver is granted. If the prerequisite waiver is granted, Dr. Dass will sign the Departmental Permission Form.
- 6. Dr. Dass must be the one who signs all Departmental Permission Forms for the Department of Business Administration.
- 7. It is the student's responsibility to follow-up with the Department of Business Administration to determine whether or not the prerequisite waiver has been granted.
- 8. The Department of Business Administration will email the signed Departmental Permission Form back to the student, who will be responsible to email the signed form to the Academic Advising Office in their home faculty (the signed form for **Asper students** will be emailed to the Asper Undergraduate Program Office becomm@umanitoba.ca).
- 9. Exception: GMGT 4010 Administrative Policy the Asper Undergraduate Program Office makes all decisions regarding prerequisite overrides.

Last updated March 28, 2024

THE UNIVERSITY OF MANITOBA

ASPER SCHOOL OF BUSINESS

DEPARTMENTAL PERMISSION FORM

Section A: This section is to be completed by the STUDENT and emailed to the DEPARTMENT HEAD for approval. After Section B has been completed by the Department Head, the student must email the signed form to the Academic Advising Office in the student's home faculty NO LATER THAN 4:00 P.M. ON THE FINAL DATE FOR REGISTRATION REVISIONS for the term indicated. Consult the appropriate Academic Schedule for specific dates.

Name:	
(Last Name)	(Given Name)
Student Number:	Faculty:
Fall 20 Summer 20 S Course Code: S	Winter 20 Section: (One course per form please.)
Section B: This section is to be comple	eted by the DEPARTMENT HEAD no later than the final date or the term indicated. Consult the appropriate Academic
The Department/Program of registration for the above noted student in the	e above noted course as follows:
Notwithstanding the lack of appropriate prerequisite	Notwithstanding the lack of appropriate co-requisite
Year in Program ("CLASS" override)	Written consent required
Signed:(Department Head)	Date:
OFFICE of the student's ho	is section is to be completed by the ACADEMIC ADVISING me Faculty/School. For Asper students, this section is to be dergraduate Program Office; please email the signed form ca
Advisor	Date Comments:
Space Assigned by	Date