Requesting a Prerequisite Waiver for a Department of Supply Chain Management Course (SCM, MSCI, OPM)

1. The student may print off 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, Professor S. Appadoo SS.Appadoo@umanitoba.ca and copy the Department Administrator, Siobhan Van De Keere Siobhan.Vandekeere@umanitoba.ca on the email.

4. The student must e-mail Professor S. Appadoo, Head of the Department of Supply Chain Management, 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: SS.Appadoo@umanitoba.ca

5. Professor Appadoo will read the student’s e-mail, look at the student’s academic history, and decide whether or not the prerequisite waiver is granted. If the prerequisite waiver is granted, Professor Appadoo will sign the Departmental Permission Form.

6. Professor Appadoo must be the one who signs all Departmental Permission Forms for the Department of Supply Chain Management.

7. It is the student’s responsibility to follow-up with the Department of Supply Chain Management to determine whether or not the prerequisite waiver has been granted.

8. The Department of Supply Chain Management will email the signed Departmental Permission Form back to the student, who will be responsible to email the signed form to the Program Advisor in their home faculty (the signed form for Asper students will be emailed to the Asper Undergraduate Program Office b_comm@umanitoba.ca).

Last updated July 10, 2020
THE UNIVERSITY OF MANITOBA
FACULTY OF MANAGEMENT
DEPARTMENTAL PERMISSION FORM

Section A: This section to be completed by the STUDENT and presented to the INSTRUCTOR (if required) and DEPARTMENT HEAD for approval. Once Section B has been completed by the Instructor and Department Head, this form must be presented to the Student's Dean's Office NO LATER THAN 4:30 P.M. ON THE FINAL DATE FOR REGISTRATION REVISIONS for the session indicated. Consult the appropriate Academic Schedule for specific dates.

Name: ____________________________ (Last Name) ____________________________ (Given Name)

Student Number: ____________________________ Faculty: ____________________________

☐ Fall 20 ___ ☐ Winter 20 ___
☐ Summer 20 ___

Course Code: ____________________________ Section: ____________________________ (One course per form please)
(example: ACC 1100)

Section B: This section to be completed by the INSTRUCTOR (if required) and DEPARTMENT HEAD no later than the final date for registration revisions for the session indicated. Consult the appropriate Academic Schedule for specific dates.

The Department/Program of ____________________________ authorizes registration for the above noted student in the 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: ____________________________ Date: ____________________________
(Instructor)

_______________________________ Date: ____________________________
(Department Head)

Section C: This section to be completed by the DEAN/DIRECTOR'S REPRESENTATIVE of the student's Faculty/School.

Advisor: ____________________________ Date: ________ Comments: ____________________________

Space Assigned by: ____________________________ Date: ________

April 23, 2015
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