

Lewis & Clark College Registration Prerequisite Substitute/Waiver/Consent Form

Student Name

Student ID

Student LC email

Phone

Term (example: Fall 2010)

To bill filled in by Instructor:

This student has consulted with me and has my consent to register in the following course:				
DEPT	COURSE #	SECTION #	Course Title	Instructor (please print)

Consent to register for this course: _____
(Instructor's Signature)

Submit this form or ask the instructor to email consent to the Registrar's Office with the above information (reg@lclark.edu) BEFORE your online registration appointment.

YOU WILL REGISTER **ONLINE** FOR THIS COURSE