ROWAN UNIVERSITY
DUPLICATE COURSE WAIVER

(One course waiver per form)

Rowan ID: _____ TERM: _____

Name: _____ _____
(last) (first)

Course number: Course title:

_____ _____

This form allows registration into multiple sections of one course. It should be used only for courses for which multiple sections may be offered in a given term, each with a different content/subject of study, such as Special Topics courses, Selected Topics courses, Internships, Workshops, Etc.

It should not be used for sections of courses with the same content.

Detail the reason(s) for the above waiver request:

_____

_____

_____

_____

_____ _____
Student's signature Date

_____ _____ _____
Signature of Department Chairperson's Printed Name Date
Chair Where Course Resides*