

College of Business Permit to Register

NOTE: College of Business does not waive Course Prerequisites

ROWAN ID: _____ TERM: _____
CRN---Course Reference Number: _____
COURSE NAME: _____
STUDENT'S NAME: _____

SPECIALIZATION:

- Accounting
- Finance
- Entrepreneurship
- Human Resource Management
- Marketing
- MIS
- Management

PERMISSION IS REQUESTED BECAUSE (check all that apply):

_____ Student is a Pre-MBA student, all prerequisites met (attach documentation)
_____ Non-matriculated student, all prerequisites met (attach documentation)
_____ Student is matriculated at Edison State College
_____ Student has taken Calc I instead of Calc T&A

Student's Signature: _____ Date: _____

PERMISSION IS REQUESTED BECAUSE (check all that apply):

_____ Student has completed specified courses but is short the required number of credits
_____ Transfer coursework not processed by Registrar (attach documentation)
_____ Non-Business student is taking articulated electives outside his/her program
_____ Student is a Business Minor, all prerequisites met
_____ Curriculum change proposed, awaiting implementation date

Student's Signature _____ Date: _____
Advisor's Signature _____ Date: _____
Dean's Signature _____ Date: _____

Copies: Student Folder Dean's Office

Registered _____ Date: _____
Authorized to Register _____ Date: _____