



Mt. San Antonio College | Counseling Center
Student Request for Prerequisite Override

Student ID: _____ Term/Year: _____
Last Name _____ First Name _____
Phone: _____ MT. SAC. Email Address: _____

Attach an unofficial copy of all transcript(s) necessary to confirm successful completion (C or better) of prerequisite(s).

Course(s) plan to register for:	Name of course taken at another college	Grade Earned	Name of school where course was taken
Example: SOC 1	English 101	B	University of Los Angeles
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I understand this is only a temporary single term and course specific override. A permanent prerequisite clearance must be processed through Admissions and Records department.

Student Signature: _____ Date: _____

It may take up to 24 hours for clearance.

OFFICE USE ONLY

DECISION: ☐ **APPROVED** ☐ **DENIED** ☐ **RESUBMIT**

Comments: _____

Signature: _____ Date: _____

SPACMNT Notes ☐