

NEW MEXICO STATE UNIVERSITY

COLLEGE OF ARTS & SCIENCES

DEPARTMENT OF MATHEMATICAL SCIENCES

PREREQUISITE CONTRACT

Student Name _____ BANNER ID # _____

I understand that I am being allowed to take _____ without having the
course
formal prerequisite during this semester _____ *only*. If I receive a D, F,
semester/year
or W, in this course, I will be required to earn a C or better in the prerequisite course(s),
_____, before being allowed to re-enroll in this course.
prerequisite course(s)

Student Signature _____ *Date* _____

MPE SCORES: _____ MATH ACT: _____

Advisor Signature _____ *Date* _____

Prerequisite contract is not approved without Dean's signature.

Dean Signature _____ *Date* _____

ENGINEERING
Student's College