Visiting Student Registration

Minneapolis College uses course prerequisites in order to promote student success. Prerequisites and placement levels must be successfully completed prior to registering for a course.

*This form is for visiting students only.*

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**Step 1: Student Information**

- **Star ID or MCTC ID:** ___ ___ ___ ___ ___ ___ ___ ___  
  - Fall  
  - Spring  
  - Summer  
  - Year ___

- **Name (Print):** ____________________________ (include any former names)

- **Email (Print):** ____________________________

- **Check:** ☐ I have attached unofficial pdf transcripts for prerequisite screening use ONLY

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**Step 2: Course Information**

Perquisites for this course can be found in the online schedule under the notes section of the course.

- **Example:** Course ID: 000123  
  - Subject & Number: MATH 2200  
  - Section : 30

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List how you satisfy the prerequisites for this course(s). 
(Example: BIOL 1009 at the University of MN)

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Only if an instructor approval is a prerequisite, the instructor signs here:

INSTRUCTOR'S PRINTED NAME AND CAMPUSPHONE EXTENSION: ____________________________ X __________

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**Step 3: Registration and Payment Information**

By signing this form, I agree to have registration processed for the requested course(s) if approved, and to pay all tuition and fees. I am responsible for resolving any time conflicts that may occur as a result of registration into the requested courses. I understand that an unofficial transcript will only be used for prerequisite screening for the course(s) listed above. It is my responsibility as a student to submit official transcripts for evaluation.

Signature ____________________________ Date ______________

Submit this request by emailed to waiverprerequisites@minneapolis.edu, or in-person at the Student Services Center Room T.2200.

**INCOMPLETE FORMS WILL NOT BE PROCESSED.**

Contact us if you have any questions about this form or process at waiverprerequisites@minneapolis.edu

OVERRIDE / REGISTERED / DENIED WALK-IN DATE & INITIAL: ________________ EMAIL DATE & INITIAL: ________________