

MUN Chemistry Lab Waiver Form

Instructions: Download this file and use Adobe Reader to access it and fill in the information. Fields with * must be completed. Send to [Chemistry Academic Program Officer](#)

Full Name *

MUN Student Number *

MUN e-mail address *

Telephone number including area code *

Lab course to be waived *

When the course was completed (when you took the course last) *

Course and Section that you wish to register for *

Alternate Course and Section (in case your first choice is full)

Additional comments, information or explanation