



WAIVER

Chair and Associate
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Secretary
Ms. Leeanne Croteau,
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Date: _____

I, _____ do hereby grant permission for my
(name of student)
academic transcript to be submitted with my application for the purposes of being
evaluated by the host agency for acceptance into a placement for the course FORS
4205 Internship and Report.

Witnessed by:

for the Department of Forensic Science.

