

REGISTRATION OVERRIDE FORM

DATE: _____

| | |
|---------------|-----|
| Student Name: | P#: |
|---------------|-----|

The above student has the permission of the instructor/department chair to register for the following course:

NOTE: Do not use this form for preregistered courses.

CRN/Subject/CRS#/Section

Course Title

Instructor's Name

Instructor's Signature (**Required**)

REQUIRED List all override type(s) that apply for this student; please print:

Common Reasons for Overrides:

Closed section Student Lacks Prerequisite(s) Major/Minor Restriction Time Conflict*
 Class Restriction (such as junior standing required) Honors Course (for non-Honors Student)
 College Restriction (such as Crane students only) Linked Courses (taking only one of two linked courses)

**Note: Time Conflict approval means you are allowing the student to miss part of YOUR scheduled class time.*

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