

REQUEST FOR ENROLLMENT WITH TIMETABLE CONFLICT

Conflicts greater than one hour is not permitted.

Student Name and ID Number:

Term (select one):

Year:

Record all course conflict details below and obtain instructor approval for both courses.

Course 1 (Code, Title):

Section Number:

Day & Time Offered (Lecture and Lab, if applicable):

Instructor:

Course 2 (Code, Title):

Section Number:

Day & Time Offered (Lecture and Lab, if applicable):

Instructor:

Instructors Acknowledgement

I have advised the student of course responsibilities should they be enrolled with a time conflicting course.

Signature:

Signature:

Student Acknowledgement

I understand that I am responsible for making up any missed course material and for making alternate arrangements for any tests, quizzes, or other course assessments that I may miss as a result of this time conflict.

Student Signature:

Date:

Department of Aerospace Engineering Authorization (One-Hour Conflict Is Approved)

Signature of Aerospace Engineering
Associate Chair/Chair:

Date: