

REQUEST FOR ENROLLMENT WITH TIMETABLE CONFLICT

Conflicts greater than one hour is not permitted.

Student Name:

Student Number:

Term: F W Sp Sr

Year:

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

Course 1 Code, Title:

Course Section:

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

Instructor:

Course 2 Code, Title:

Course Section:

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

Instructor:

Instructor Approval Signature:

Instructor Approval 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 timetable conflict

Student Signature

Date

Department of Aerospace Engineering Authorization

A maximum of a one-hour conflict is approved.

Signature of Associate Chair/Chair

Print Name

Date