REQUEST FOR A TIME CONFLICT EXCEPTION

Students wishing to pursue an exception must connect with both instructors for a plan to address any overlap of time. If both instructors approve, students can submit the Time Conflict Exception Request Form to the Registrar's Office to complete the registration process, students will not be able to register for both classes that have an overlap in times themselves.

Student Name_____ Campus ID# _____

I will be registered as _____ UG _____ GRAD   Semester of Time Conflict _____Fall _____ Spring _____ Summer.

Semester Year _____ The two classes that are in conflict _____ & _____

Please indicate why you are requesting an exception to register for classes that conflict.

The class that will be missed _____

Please indicate how class time will be made up.

Student Signature _____ Date _____

Course _____ Section # _____   Course _____ Section # _____

Days _____ Times _____   Days _____ Times _____

I approve the time conflict between these two courses.   I approve the time conflict between these two courses.

_____   _____

Instructor Signature Required   **Instructor Signature Required**