

**AUTHORIZATION FORM**  
**Office of the Registrar**

**Schedule Conflict:** Student should complete Parts A and B and have the instructor of each of the conflict courses sign in Part C approving the time overlap. Return the signed form to the Registrar's Office.

**Credit Overload:** Student should complete Part A and get the appropriate signature in Part D (Undergraduate students must have his/her advisor's approval AND class dean's approval; Graduate students need the permission of the Office of Graduate Education). Return the signed form to the Registrar's Office. **NOTE: Undergraduate students will be charged for any credits exceeding 23 credit hours.**

**Graduate students will be charged for any credits exceeding 15 credit hours.**

**Closed or Restricted Courses and Pre-Requisite Requirement (Permission of Instructor):** Complete Parts A and B. Have the Course Instructor sign this form in Part C approving your admission to the course. Return the signed form to the Registrar's Office. This form must be submitted by the Add Deadline.

After the Add Deadline, approval of the Advising & Learning Assistance Center (ALAC) is required

**\*\*CRN# IS 5 DIGIT NUMBER IN LEFT COLUMN OF CLASS HOUR SCHEDULE\*\***

**PLEASE CHECK APPROPRIATE TRANSACTION:**

<input type="checkbox"/> Schedule Conflict	<input type="checkbox"/> Credit Overload	<input type="checkbox"/> *Closed or Restricted Courses	<input type="checkbox"/> *Pre-Requisite Requirement
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(\*NOTED AS PERMISSION OF INSTRUCTOR)

**PART A:**

Student ID Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Print Name: \_\_\_\_\_  
LAST FIRST MI

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Indicate Term/Year: Fall \_\_\_ Spring \_\_\_ Summer \_\_\_ Session 1 \_\_\_ Session 2 \_\_\_ Session 3 \_\_\_  
yr yr yr

**PART B: REQUIRED FOR SCHEDULE CONFLICT, NOTED AS PERMISSION OF INSTRUCTOR**

(#1) CRN# \_\_\_\_\_ Subject number section  
 [Example: 8 0 2 2 9 C S C I 1 1 0 0 0 1 1]

(#2) CRN# \_\_\_\_\_ Subject number section

**PART C: PERMISSION OF INSTRUCTOR REQUIRED FOR SCHEDULE CONFLICT (SIGNATURES OF BOTH INSTRUCTORS), PRE-REQUISITE REQUIREMENT, RESTRICTED AND CLOSED COURSES.**

(#1) Print Instructor's Name: \_\_\_\_\_  
(Last name, first name, middle initial)

Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

(#2) Print Instructor's Name: \_\_\_\_\_  
(Last name, first name, middle initial)

Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**PART D: REQUIRED FOR CREDIT OVERLOAD ONLY. UNDERGRADUATE STUDENTS WILL BE CHARGED FOR ANY CREDITS EXCEEDING 23 CREDIT HOURS. GRADUATE STUDENTS WILL BE CHARGED FOR ANY CREDITS EXCEEDING 15 CREDIT HOURS. TOTAL CREDITS APPROVED \_\_\_\_\_**

Advisor Signature : \_\_\_\_\_

Class Dean Signature: \_\_\_\_\_

Advisor/Office of Graduate Education Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**NOTE: ADVISING & LEARNING ASSISTANCE CENTER LOCATED IN ACADEMY HALL ROOM 4226.  
THE OFFICE OF GRADUATE EDUCATION IS LOCATED AT 1516 PEOPLES AVE**