

Time Conflict Override Form for Course Registration

This form is to be completed and submitted to the Office of the Associate Dean for Student Services and Undergraduate Affairs (ADSSUA), Room B111, or email to studentsupport@eng.famu.fsu.edu.

STUDENT NAME:			
STUDENT EMPL ID:			
EMAIL ADDRESS:			
UNIVERSITY: FAMU		FSU	
SEMESTER:	_	YEAR: DA	TE SUBMITTED:
I have discussed the course conflict with the instructors and we have agreed upon the following arrangement in order to meet the course requirements:			
Conflicting Course Information			
Course Prefix and Number Cl	lass#	Course Name	Scheduled course meeting times/days
Instructor:		Instructor's signature/date:	:
Course Prefix and Number Cl	lass#	Course Name	Scheduled course meeting times/days
Instructor:		Instructor's signature/date:	
Student's signature:			Date
Department Chair/Designee's approval signature:			Date