OFFICE OF ADMISSIONS AND RECORDS

PETITION TO REGISTER IN CLASSES WITH OVERLAPPING TIMES

STUDENT'S NAME ___________________________   SOC. SEC. # ______ / ______ / ______
(Print Only)

ADDRESS ___________________________   TEL. No. (______)

(STREET)

(CITY) (STATE) (ZIP)

NOTICE: Students may not register in two classes which meet at the same time or whose schedule
meeting times overlap. In certain cases, when students might otherwise be denied the opportunity to
complete their studies in a reasonable period of time, exceptions may be approved by completing this
form with the Admissions Office before the end of the third class meeting. Approval of a petition will
require: (1) A rational justification (not scheduling convenience),
(2) A written plan by the faculty member assigned to the second class indicating the manner
by which the student will be required to make up the time of overlap. Approval will not be
granted to register in two classes with overlapping lecture sessions, and
(3) Overlap of 10 minutes or more requires signature of Division Dean and VP. of Academic
Affairs.

Semester ___________________________   Year _________   Date ___________________________

List the class to be attended as scheduled as class 1. Class 2. in class to be attended with a modified schedule.

Class No 1. 

Sect. # Course name & #

Meeting times: ____________________________________________

Class No 2. 

Sect. # Course name & #

Meeting times: ____________________________________________

Attach on separate sheet the faculty’s proposal of weekly schedule for making up overlapping hours for
class No 2:

Attach on separate sheet the petitioner’s statement of justification:

Students Signature: ____________________________________________

Approval signature of instructor for Class No 1: ____________________________

Approval signature of instructor for Class No 2: ____________________________

_________________ Approved _______ Denied ____________________________
Division Dean ______________________ Date ______________________

_________________ Approved _______ Denied ____________________________
VP. Of Academic Affairs ______________________ Date ______________________

_________________ Approved _______ Denied ____________________________
Registrar, Admissions & Records ______________________ Date ______________________

Rev.GN 07/09