

Course Conflict Resolution Form

Not valid until filed in the Registrar's Office by the student.

Student Information	
Name: _____	WID: _____
Major: _____	Advisor(s): _____
Signature: _____	Date: _____

Notes
<p>Student – Add one of the courses online and then bring the completed form to the Registrar's Office where the other course(s) will be added for you. You will not be able to add both conflicting courses yourself.</p> <p>Instructor – By signing this form, you are granting permission for the student to enroll in the course regardless of the course status. That is, your signature offers full course consent (e.g., closed courses and pre-requisites).</p>

Course Information						
I wish to enroll in the following conflicting course(s) for the <input type="checkbox"/> Fall <input type="checkbox"/> Spring (check one) semester of 20_____. Signatures of BOTH instructors are required for two classes in time conflict.						
Department	Course #	Section	Credits	Instructor Name	Instructor Signature	Date