



Approval for Overlapping Classes

Overlapping classes are permitted only if ample justification for enrollment in both is presented, and only if one of the instructors of the overlapping classes agrees to the student’s request to make up missed time at some other time during the same week. Except in extreme cases, the time conflict must be no more than 15 minutes per class and the instructor of the class in which time will be made up must specify the manner in which this will be done.

NOTE: This process must be completed prior to the last day to add

TO BE COMPLETED BY THE STUDENT

SEMESTER _____ YEAR _____ Date: _____
 Fall Spring Summer _____

Print Name _____ Student ID or Social Security #: _____
Last Frist Middle

OVERLAPPING COURSES

Ref./Sec #: _____ Course Title & #: _____ time of class: _____ Days: _____
Ref./Sec #: _____ Course Title & #: _____ time of class: _____ Days: _____

REASON BOTH CLASSES ARE REQUIRED AT THIS TIME

_____ Student Signature

TO BE COMPLETED BY THE INSTRUCTOR (Instructor of the class with time to be made up must specify the manner in which the student will make up the time missed)

I agree to supervise the student in making up time missed due to the overlap.

_____ Date _____
Instructor’s Name (class time to be made up) – Please Print

_____ Date _____
Instructor’s Signature (class time to be made up)

APPROVAL

I agree that a rational justification exists and that this document will be retained for audit purposes.

_____ Date _____
Vice- President of Instruction