

## Approval of Registration for Courses with Overlapping Meeting Times

Banner does not allow students to register for courses with meeting times that overlap. Students who want to register for courses with meeting times that overlap **to a limited degree** may use this form to petition for permission to enroll in the courses. Examples of course registrations that might be approved are as follows:

- a course that begins close to the end of a multi-hour lab that does not take the entire time to complete
- a course, one of whose meetings gathers at a time other than its formally scheduled hour
- a course that begins less than 10 minutes after the earlier course ends (Banner enforces a ten-minute gap between classes.)

Courses with meeting times that overlap to a significant degree, or in which the student will miss substantial portions of one or the other course's meetings that cannot be made up in some appropriate manner, will not be approved. The College Curriculum Council does not allow students to register for such courses.

This form requires a brief description of the nature of the course overlap and the signatures of instructors for both courses, the student seeking overlap permission, and the Deputy Dean of the College. Once approved, registration for the overlapping course will be handled by the Registrar's office.

Semester \_\_\_\_, 20\_\_-20\_\_

Student's Name: \_\_\_\_\_ Banner ID: \_\_\_\_\_

Course 1: \_\_\_\_\_ Meeting Times: \_\_\_\_\_

Course 2: \_\_\_\_\_ Meeting Times: \_\_\_\_\_

Description of overlap: \_\_\_\_\_

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As part of this agreement, the student agrees to participate in all components of both courses and to fulfill all requirements expected of the students registered for them. By signing this agreement, the student is assuming full responsibility for whatever academic risks this arrangement might entail.

Instructor of  
1st course:           Signature: \_\_\_\_\_           Date: \_\_\_\_\_

Instructor of  
2nd course:           Signature: \_\_\_\_\_           Date: \_\_\_\_\_

Student:               Signature: \_\_\_\_\_           Date: \_\_\_\_\_

Deputy Dean of  
the College:           Signature: \_\_\_\_\_           Date: \_\_\_\_\_

**Registrar's Office Use Only:**

Course Registered: \_\_\_\_\_

Date Registered: \_\_\_\_\_           Processed By: \_\_\_\_\_