



REGISTRATION OVERRIDE

(do not use after third week of Semester)

Revised Autumn 2021

Student ID Number _____

Last Name _____ First Name _____ Middle _____

Email _____

Fall Spring 20____

(Circle one) Phone Number _____

DROP ON CYBERBEAR	Course Request #	Subject	Course #	Section	Credits	Grade Option
ADD						<input type="checkbox"/> Traditional <input type="checkbox"/> Credit/No Credit <input type="checkbox"/> Audit
LINK		SECTION #	<i>Link Sections are for courses with a Required Lab/Small Group ONLY</i>			

Courses taken to meet General Education Requirments must be taken for a traditional grade.

By signing below, I give my permission to the Registrar's Office to enroll this student and override all restrictions (Major, Class, Consent of Instructor, and enrollment limit)

Instructor _____ Date _____
Signature

Link Instructor _____ Date _____
Signature

Override is available for instructor review in Registrar's Office

The following options DO NOT require the instructors signature:

Override Time Conflict
 Change Variable Credit from ____ to ____
 Change Grade Option
 Traditional Credit/No Credit Audit

Student _____
Signature _____
Date _____