## ADVANCE/SPECIAL PERMISSION FORM

### Last Name                                                         First Name                                                          Middle Initial

### CRN | Subject | Course Number | Section

### TERM FOR PERMISSION

<table>
<thead>
<tr>
<th>YEAR</th>
<th>TERM</th>
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<td></td>
<td>Fall</td>
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<td>Winter</td>
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<td>Spring</td>
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You are encouraged to request permission in advance of your registration day and time. Permission, if granted, can be viewed in UR Self-Service. Submit completed forms to the Business Administration General Office - Ed 517.

### 1. Permission to enroll in more than max hrs in current semester (Students who have successfully completed 30 credit hours, have a PGPA over 75%, and have taken full course loads)

**Reason for request:**  

Approved: YES_____ NO_____

Date Signed  

Program Advisor's Signature

### 2. Permission to register for a course that has already been completed or attempted

**Reason for request:**  

Approved: YES_____ NO_____

Date Signed  

Program Advisor's Signature

### 3. Permission to register without the pre-requisite (Permission from other U of R Faculties/Departments based on acquired knowledge. Exceptional cases in BUS when a pre-requisite is under review.)

**Reason for request:**

Approved: YES_____ NO_____

Date Signed  

Program Advisor's Signature

### 4. Permission to register in a restricted course

**Reason for request:**

Approved: YES_____ NO_____

Date Signed  

Program Advisor's Signature

### 5. Permission to register late - after the final add date

**Reason for request:**

Has the student been attending the class: YES ____ NO ____

Approved: YES_____ NO_____

You will allow late registration for this student: YES ____ NO ____

Instructor's Signature  

Date Signed  

Program Advisor's Signature

I am aware that:

- Permission is not automatic.
- Receipt of permission does not guarantee that space is available in the section or course.
- It is my responsibility to meet the prerequisites of courses and to comply with academic regulations.
- It is my responsibility to ensure the accuracy of my registration.

**Student Signature**  

Date:

**Student Email:**

Student will be contacted using email provided regarding decision on request.

**Banner Entry:**  

Initials:  

Date: