

STUDENT'S NAME AND ADDRESS

STUDENT ID NUMBER

Last Name	First Name	Middle Initial
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CRN	Subject	Course Number	Section

TERM THAT PERMISSION IS REQUESTED FOR	YEAR		TERM
			Winter
			Spring

You are encouraged to request permission in advance of your registration day and time.

Return this form to the Science Student Services Office (LB238).

Permission, if granted may be viewed in YoUR Self-Service.

<p>1. Overload Permission (to enroll in a class that is full) All courses require instructor signature.</p> <p>_____ Instructor</p> <p>_____ Department Head</p> <p>_____ Course number and section</p>	<input type="checkbox"/> CAPACITY
<p>2. Permission to enroll in more than max hrs in current semester Reason for request: _____</p> <p>_____ Faculty of Science Associate Dean's Signature</p>	<input type="checkbox"/> MAXHRS
<p>3. Permission to Register for a course that the repeat limit has been exceeded. Must have the Associate Dean's signature.</p> <p>_____ Date Signed</p> <p>_____ Associate Dean's Signature</p>	<input type="checkbox"/> REPEATLMT
<p>4. Permission to register without the prerequisite, or permission of Dept. Head required Requires permission of the Department Head. Dept. Head may require Instructor permission prior to consideration.</p> <p>Without the prerequisite of: _____ Concurrently with the prerequisite of: _____</p> <p>_____ Instructor's Signature (if required)</p> <p>_____ Dept. Head's Signature</p>	<input type="checkbox"/> PREREQ
<p>5. Permission to register in a restricted course</p> <p><input type="checkbox"/> Champion College _____ Instructor's signature</p> <p><input type="checkbox"/> First Nations University of Canada _____ Department Head's signature</p> <p><input type="checkbox"/> Luther College _____ Academic Office signature</p> <p><input type="checkbox"/> Other _____ Authorized signature</p>	<input type="checkbox"/> DEGREE
<p>6. Time Conflict Requires Permission of both course/lab instructors</p> <p>_____ Course/Lab #1 _____ Instructor's signature</p> <p>_____ Course/Lab #2 _____ Instructor's signature</p>	<input type="checkbox"/> TIME

7. Registration beyond the date to add a course

Requires permission of the Instructor. Permission will only be granted in exceptional circumstances.

Please specify course and reason for late registration:

Instructor's Signature

Registration

8. Other

Signature needed may be: Instructor and/or Department Head

Please specify:

Instructor's Signature

Department Head Signature

SPECIAL
APP

Failure to add/drop classes prior to published deadlines may result in financial and academic penalties (such as grades of W or NP.) Failure to comply with degree program and University regulations may result in the academic penalty of not receiving credit for a course or not being able to make progress towards the completion of a degree program.

If you are currently registered in a course that meets the pre and/or co-requisite, the system will recognize that the course is in progress. **You are required to drop the higher-level course** should you fail the prerequisite. Students are not automatically dropped or registered in courses. Students are solely responsible for their registration.

If you would like to audit a class, contact the Registrar's Office.

If the course or class (a section of a course) does not appear in the Class Schedule in **YoUR Self-Service**, view the Class Schedules available in UR Self-Serve and/or contact your Faculty or College office to determine if and/or when the course will be offered.

Faculty and College offices will be monitoring registrations in all courses.

NOTE: To obtain permission to take classes for a third attempt, or to take a course that requires special permission, please see the Science Student Services Office (LB 238) for further assistance. Courses may require more than one override. Also, please consult Science Student Services if you are unsure of whose approval to obtain.

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:

SFASRPO Entry:

Initials:

Date: