**TIME CONFLICT APPROVAL**

Students are not able to enroll simultaneously in classes meeting during the same time period. Students may petition the Associate Dean for approval to register for courses that have a time conflict. If approval is given you must register for the course through Student Registration and Record Services.

1. Seek approval from both instructors where the time conflict occurs. Be sure to obtain signatures for both instructors.
2. Submit this form to the Associate Dean for review.
3. If approved, submit the completed form to Student Registration and Record Services.
4. You will be notified once you are eligible to register. Be sure all other applicable course restrictions have been lifted by the department.

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**Student Name:** ____________________________  **Cortland ID Number:** C00-________________

**Major:** ____________________________  **Semester:** ____________  **Year:** ____________

This student has permission to register for the following two courses that have a time conflict:

<table>
<thead>
<tr>
<th>Class Meeting Time</th>
<th>CRN</th>
<th>Course Prefix</th>
<th>Course Num.</th>
<th>Section</th>
<th>Title</th>
<th>Cr. Hrs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Course 2</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Instructor’s 1 Signature:** ____________________________  **Date:** ____________

**Instructor’s 2 Signature:** ____________________________  **Date:** ____________

**Associate Dean Signature:** ____________________________  **Date:** ____________

**Student’s Signature:** ____________________________  **Date:** ____________

**Advisor / Associate Dean Comments:**

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**SRRS’S OFFICE USE ONLY:**

**Processed By:** ____________________________  **Date:** ____________

**Notes:** ____________________________