William & Mary
Office of the University Registrar
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Williamsburg, VA 23187-8795
757-221-2800 Fax 757-221-2151
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TIME CONFLICT OVERRIDE

GUIDELINES: ***This form should be used when a student wishes to take two courses whose scheduled times overlap.*** You must have the permission of both instructors affected by the time conflict.

INSTRUCTIONS:

1. Complete Sections A and C of this form. (Student MUST be registered for one of the courses listed below.)
2. Obtain both instructors' signatures for approval in Section B.
3. Return this form to the Office of the University Registrar no later than the last day of the Add/Drop period.

SECTION A STUDENT INFORMATION

Name: _____ **93#**_____
(Last) (First) (MI) Student ID #

_____
Semester and Year

Courses with Time Conflicts:

Course Reference Number (CRN)	**Course ID** ***(Department, Course number, Section)***	***Credit Hours (#)***	***Meeting Days & Times***

SECTION B

To the Faculty:

If you wish to provide permission to override a time conflict between the two courses listed above, please sign below. Both instructors' signatures are required for student registration in both courses.

*********INSTRUCTOR USE ONLY**********

_____ _____
Instructor Signature for Course 1 Date Instructor Signature for Course 2 Date

Print Name: _____ Print Name: _____

SECTION C STUDENT ACKNOWLEDGEMENT

By signing below, I assume full responsibility for managing the time conflict and for dropping a course in the event I decide not to remain enrolled.

_____ _____
Student Signature Date

*********FOR OFFICE USE ONLY*********

Processed by: *Initials* _____ *Date* _____ Added to student file: Initials _____ Date _____

Revised: 12/2018