TIME CONFLICT FORM

Except in rare circumstances, the University of South Florida St. Petersburg does not permit students to register for courses that are scheduled to meet at the same times or that overlap meeting times. In order to be permitted to register for or add courses that result in a time conflict, follow instructions below.

1. Complete all information including obtaining signatures from both instructors.
2. Take the form to your Academic Advising Office representative located in DAV 134.
3. After obtaining your Academic Advisor's signature, present the completed form with the required approval to the registration terminal operator in order to register for or add the courses listed below.

Note to Advisor: Please make a copy of the form to include a copy in the student file.

_____ _____ _____ _____

STUDENT NAME **USF-ID #** **Classification** **Term/Year**

Justification: _____

_____

LIST COURSES IN TIME CONFLICT

1. | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |

Reference # **Dept.** **Prefix** **Course #** **Section** **Days & Times**

*_____ _____

Signature of Faculty/Instructor **Date**

2. | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |

Reference # **Dept.** **Prefix** **Course #** **Section** **Days & Times**

*_____ _____

Signature of Faculty/Instructor **Date**

If either instructor objects, please indicate by signing at the bottom of this form

STUDENT IS RESPONSIBLE FOR COMPLETION OF QUIZZES, TESTS, EXAMS, AND/OR ASSIGNMENTS AT SCHEDULED TIMES. THE INSTRUCTOR IS IN NO WAY OBLIGATED TO MAKE PROVISIONS FOR MAKE-UP QUIZZES, TESTS, EXAMS, AND/OR ASSIGNMENTS THAT ARE MISSED DUE TO TIME CONFLICT

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_____ _____

Student Signature **Date**

_____ _____

Signature of Academic Advisor (if approved) **Date**

_____

For Internal Use Only

*****I object to this time conflict and advised the student to modify his/her schedule

_____ _____

Signature of Faculty **Date**