ENGINEERING PERMISSION FORM

STUDENT NAME: _____ STUDENT NUMBER: _____

EMAIL ADDRESS: _____

PLEASE CIRCLE THE APPLICABLE SESSION: Fall/Winter   Spring/Summer

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Course Prerequisite Waiver

This approval is required if you do not have the academic prerequisites to register for a course or stay in a course.

Course prerequisites are found in the Course Section of the Undergraduate Calendar.

Course: _____

Instructor Name: _____   Instructor Signature: _____
                    (please print name)

Date:

Required Permission

This approval is required if the course for which you wish to register requires permission of the department.

Course: _____   Term: _____

_____   Dept Signature:_____
DEPARTMENTAL AUTHORIZATION (Please Print NAME)

Date:

Term Unit Overload

The maximum number of units that can be taken per term is 21.

Number of units required above 21   Term 1: _____   Term 2:_____

PROGRAM: _____   LEVEL: _____

Name: _____   Dept Signature: _____
DEPARTMENTAL AUTHORIZATION (Please Print NAME)

Date: