

**Time Conflict Approval Form (Undergraduate Students)**  
**College of Engineering & Applied Sciences**

**Submit this form to the Registrar's Office for processing; Stony Brook Union, Suite 206**

**College of Engineering and Applied Sciences**

- The only students permitted to register for a time conflict or schedule-overlapping courses are those who must enroll in those courses to meet requirements of the major in order to stay in sequence for the major. The only office that can certify this is the **Undergraduate Director of the student's undergraduate program (student's major)**.
- **Students who do not have a major declared in CEAS program should not** register for CEAS courses with time conflicts.

**Section I: To the Course Instructors - AND - Undergraduate Program Director**

By signing this form you are certifying your approval for the student to register in a time conflict or in schedule-overlapping courses.

**Section II: To the Student**

This form may be used only when the course instructors and the director of your program/major certifies the need for you to register in a time-conflicting or schedule-overlapping course. Please read the above policy statement from the Colleges. The signatures of the Course Instructors and the Program Director indicates to the Registrar's Office that your registration for a time conflict may be processed providing that you submit it **by the appropriate deadline as indicated in the published semester ACADEMIC CALENDAR.**

**“It is the student’s responsibility to plan a program that avoids final examination conflicts. Instructors are not obligated to provide examinations at any time other than as per the published schedule.”**

**FALSIFICATION OF SIGNATURES MAY RESULT IN AN ACCUSATION OF ACADEMIC DISHONESTY.**

Registrar's office retains all submitted Time Conflict Permission Forms for the duration of the semester for instructor verification of signatures. Instructors and/or program directors retain the right to question the validity of the signatures on this form.

Student: Last Name / First Name                      Stony Brook ID#                      Student's DECLARED Major (Program)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Course currently enrolled in:**

Department	Course #	Year	Term	Class # (Required)

Course Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Time Conflicting/Overlapping Course to Add:**

Department	Course #	Year	Term	Class # (Required)

Course Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Undergraduate Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(Undergraduate Director of Student's Major)*

**APPROVAL to OVERRIDE CLASS LIMIT IF CLASS IS CLOSED**

\_\_\_\_\_(Date) \_\_\_\_\_

*Instructor or Departmental Signature of course to be added*

**IMPORTANT NOTE:** Unless Approval is provided, Student must find an open section to register for this course

FOR REGISTRAR OFFICE USE: Staff Initials: \_\_\_\_\_ Date Processed: \_\_\_\_\_