

## Time Conflict Form

### Steps for adding classes with time conflicts:

Students may not enroll themselves in classes that conflict in time. Students are advised to enroll in an alternate section of the class that does not conflict with other classes on their schedule. If the faculty members of conflicting courses support a student's ability to participate fully and attend the classes, the student must obtain the signature of both instructors.

Use this form to obtain permission to register for one class which overlap in scheduled meeting times. The form must be submitted no later than the **last day to add, 20th day of instruction. Petitions will not be considered after the deadline.**

Please review semester calendar for important deadlines at [www.fresnostate.edu/registrar](http://www.fresnostate.edu/registrar)

1. Register for one of the classes during registration period.
2. Students must also obtain a permission number from the class instructor or the department office in order to register for classes that are full or that require special consent.
3. Obtain approval and signatures from instructors of BOTH classes.
4. Submit the completed form to [5592786020@fax.csufresno.edu](mailto:5592786020@fax.csufresno.edu)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please indicate term of conflict: \_\_\_\_\_

**Student:** I understand that the meeting times of the two classes listed above overlap. In addition, I understand that if this petition is approved I am responsible for all assigned work in both classes.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Course One - Currently Enrolled:

Class Number	Subject	Course Number	Section Number	Units	Days	Begin Time	End Time
12345	MATH	100	02	3	M, W, F	8:15 am	9:15 am

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

### Course Two - Requesting to Add:

Class Number	Subject	Course Number	Section Number	Units	Days	Begin Time	End Time	Permission Number (if required)

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

**NOTE TO INSTRUCTORS:** Your signature indicates that you have worked out a plan, acceptable to all parties, that allows the student to enroll in both courses and complete all assigned work.

### Administrative Use Only - Registrar Office

Processed by \_\_\_\_\_  
(Staff Initials)

PS Update: \_\_\_\_\_  
(Date)