Time Conflict Resolution Form

Students who would like to add a course that meets at the same time (or any amount of overlap) must have permission from both instructors. The form below must be reviewed and signed by the two instructors.

_____ _____ _____

UR ID Number   Student Last Name   Student First Name

Note: All fields are required

_____   _____

Term   Year

Course One

_____   _____

Course Number *(xxxx abc-1)*   Course Title

Course Two

_____   _____

Course Number *(xxxx abc-1)*   Course Title

Instructor Approval

By signing this form, you are expressing awareness and approval of the time conflict/overlap of the two courses. Additionally, this signature implies a conversation and agreement of the solution with the student.

Course One Instructor Signature: _____ Date: _____

Course Two Instructor Signature: _____ Date: _____

Submission Guidelines: This form should begin with the instructor and the student. Once signed by both instructors, it must be submitted with an the completed Add/Drop Form to the Office of the University Registrar at registrar@rochester.edu.