SETON HALL UNIVERSITY Office of the Registrar TIME CONFLICT RESOLUTION FORM

Use this form to request permission to register for courses with conflicting meeting times. Present submit this form with all required signatures to the Office of the Registrar in Bayley Hall (room 110). This registration must be done in person; web registration will block registrations involving time conflicts.

Semester:	Date:	
Name:	SHU ID:	
Major:		
I am requesting permission to register times:	for the following two courses	s with conflicting meeting
Course Information (Subject, number, section, and CRN)	Meeting Days/Times	Day/Time in Conflict
How will this conflict be resolved?		
Student Signature	Date	
Approval of the chair of each course is signature of the chair below signifies a		will be allowed. The
1Chair Signature	Date	
2	 Date	