# Seton Hall University
Enrollment Services

## TIME CONFLICT RESOLUTION

Use this form to request permission to register for courses with conflicting meeting times. Present the completed form with all required signatures in person to Enrollment Services (first floor, Bayley Hall). 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 for two courses with conflicting meeting times as follows:

| Course Number | Meeting Days/Times | Day/Time in Conflict |
|---|---|---|
| 1. | | |
| 2. | | |

How will this conflict be resolved? _____
_____
_____
_____

_____
Student Signature Date

Approval of the chair of each course is required before registration will be allowed. The signature of the chair below signifies an approval of this request.

1. _____
Chair Signature Date

2. _____
Chair Signature Date