UCONN
SCHOOL OF FINE ARTS
MUSIC

Out-of Sequence Approval Form

_____   _____
Name   PeopleSoft #

_____   _____
Degree   Concentration

Course to be Approved

	▬ Fall	▬ Intersession	▬ Spring	▬ May Term	▬ Summer

_____
Catalog Year   Requirement Term (check one)

MUSI
_____   _____   _____   _____   _____
Class #   Subject   Catalog #   Section #   Credits

The undersigned approves of this student receiving full credit for the above class, taken out of sequence, toward his/her academic program.

_____   _____
Student's Signature   Date

_____   _____
Department Head's Signature   Date

To the Registrar's Office: Please enroll the student in the above course and give the student full credit for the above course, taken out of sequence.