UCONN
SCHOOL OF FINE ARTS

MUSIC

Time Overlap Form

Name _____   PeopleSoft # _____

Phone # _____   E-mail _____

Conflict Type

▬ Absense from Music Course
▬ Late Arrival to Music Course
▬ Early Dismissal from Music Course

Conflict Frequency

▬ Semester
▬ Individual date(s): _____

*For semester course conflicts, please complete the section below.

Title of Conflicting Course _____   Catalog # _____   Section # _____

M	**Tu**	**W**	**Th**	**F**

Department of Conflicting Course   Day(s) of Conflict (circle all that apply)   Time(s) of Conflict

Reason for Conflict _____

The student will: ***Arrive   Depart   Be Absent*** to/from **MUSI** _____ at _____ on _____ .
_____(circle)_____(course #)____(time)____(day(s))

Student's Signature _____   Date _____

Instructor's Signature _____   Date _____

Department Head's Signature _____   Date _____

To the Regitrar's Office (ext. 0062). Please override and enroll this student in:
MUSI

Class #	Subject	Catalog #	Section #	Credits