

**Howard R. Hughes College of Engineering
Center for Academic Advising**

PERMISSION TO ENROLL IN A FULL CLASS

Date: _____ Semester: _____

Phone: _____ Major: _____

Student Name: _____
Last First M.I.

Email address: _____

Student L # or SSA# _____ Advance Standing? Yes No

Course or Laboratory: Dept. _____ # _____ Sect. # _____ Call # _____

Pre/Co requisites for this course: _____ | Took class when? _____ | Grade? _____ | Verified! _____

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Why should you get a waiver to enroll in this full class?

Students Signature _____

Date: _____

Approvals:

Instructor:

Date:

Department:

Date:

Jeanette Sorensen, Director

Date:

Approved:

Denied: