

## **Petition to Allow Schedule Time Conflicts**

Please print using a b	lue or black pen	Semester and year:				
	ng this entire packet, completed a e class they wish to attend that ca			the justification, the		
		Date:				
Student ID Number:	Α	Student Phone Number:				
Enter the course info	rmation for both courses in which	you wish to enroll or a	re enrolled in:			
COURSE SECTION #	DURSE SECTION # COURSE NAME		CLASS DAY AND HOUR			
EXACT MINUTES OF CONFLI	CT (NOT TO EXCEED 15 MINUTES)	LOCATION (BLDG 8	ROOM #)	SEMESTER/YEAR		
Currently Enrolled? Yes or	r No					
COURSE SECTION #	COURSE NAME		CLASS DAY AND HOUR			
EXACT MINUTES OF CONFLI	CT (NOT TO EXCEED 15 MINUTES)	LOCATION (BLDG 8	 k ROOM #)	SEMESTER/YEAR		
Currently Enrolled? Yes or	r No					
Please explain in deta	<b>To be</b> ail why you must take these course	completed by the studes at these times. (Plea				
		_				
Student's signature			Date			
		— Page 1 of 4 —				

## To be completed by Instructor

A time conflict exists between your class and another course of the above student's choice. The college may permit the overlapping schedule, if:

- 1) Rational justification (scheduling convenience is not one) on a student-by-student basis, can be established and can be documented by the instructor; and
- 2) The instructor maintains documentation that the student made up the hours of overlap in the course partially or wholly at some other time during the same week, under appropriate supervision or other special approved arrangements.

Please specifically state how the student will make up the hours missed from your class. You must also complete the contract for time conflict make up schedule.

Contract for time conflict make up schedule.	roa blank				
Do NOT leave this a	rea blank.				
Instructor's signature	C extension	Date			
of class be under the supervision and The Admissions and Records office requires accurate documental regularly scheduled time. Time "made up" must be done under appeared by the established. Justification that will be considered is that the of studies in a reasonable period of time.  Office Use only:	tion for each of the overlap propriate supervision. A ratio	oping hours, v	n on a studen	t-by-stuc	lent basis
Counselor	Date		Approved		Denied
Instructor	 Date		Approved		Denied
Division Chair	Date		Approved		Denied
Registrar/Director of Admissions	Date		Approved		Denied
Vice President of Instruction	Date		Approved		Denied

Page 2 of 4

## CONTRACT FOR TIME CONFLICT MAKE UP SCHEDULE

## (To be completed and signed by the instructor of record or department chair)

Print clearly, using a blue or black pen

Student's Name:				Date	
TC's Student Id N	umber: A				
CRN Class		Day		Time	
Time	Monday	Tuesday	Wednesday	Thursday	Friday
			Time "made u	p" must be done under a	ppropriate supervision
The instructor is up time and turn	also required to ed into the Adm	keep a separat	e attendance ro	ster to account f	for the made
•					
Student Signatur	e:				



**TO:** Students with Schedule Conflicts

**FROM:** Registrar/Director of Admission

**SUBJECT:** Time Schedule Conflicts

According to state guidelines, students are not allowed to enroll in two or more credit courses, which meet at the same or overlapping times.

However, overlap in student schedules may be allowed if there is:

- 1. rational justification for the overlap, and
- 2. class time missed is made up in another section of the same class during the same week under appropriate supervision or by special, approved arrangements.

If you feel these two conditions can be met, complete both sides of the time conflict form. The instructor of the course that you are missing time from, to attend the other course must complete the instructor portion, and the time conflict make-up schedule. It is imperative that this information is complete and accurate.

The student's petition for a schedule conflict will be reviewed and approved/disapproved. You will not be allowed to enroll in classes for which a student schedule conflict exists until this petition is approved.

The student's petition will be reviewed within 48 hours. It is **the student's** responsibility to contact the Admissions and Records office in the Student Services Building to learn if the petition was approved or denied. The student may make contact in person or by phone. Please contact the Registrar/Director of Admissions at (661) 763-7870.

If approved, the student must register and pay appropriate fees by the last day to add classes as published in the schedule of classes.