

PERMIT TO REGISTER FOR A COURSE (UNDERGRADUATE)

**SCHOOL OF ENGINEERING AND APPLIED SCIENCE
University of Pennsylvania**

To the student: Please complete and return this signed form to the SEAS Research and Academic Services (RAS) Office in Towne 109.

Term Degree Expected: _____ Today's Date _____

Name of Student: _____ SID Num: _____

Email Address: _____ Tel Num: _____

Major: _____ Faculty Advisor Name: _____

PERMIT TO REGISTER FOR A COURSE: (Please check only one)

- Please allow this student to register for my Restricted Enrollment course.
- Please allow this student to register for my closed course.
- Please allow this student to **late** add my course (after the second week of the semester)
- Please allow this student to **retroactively** add my course (course that was taught in a previous semester).
- Please allow this undergraduate to register for my graduate course*
- Other: _____

Course: _____ Semester: _____ Instructor: _____
 DEPT NUMBER SECTION

Signature of Course Instructor: _____

Print Name: _____ Email: _____

*SEAS seniors in general may enroll in any 500 level SEAS course without instructor permission. Some 500 level courses however may exercise the prerogative to require permission of the instructor. All CIS and BE 500 level courses require instructor permission.

PERMISSION TO REGISTER FOR A COURSE WITH TIME CONFLICT:

- Please Allow this student to register for my course with a time conflict with another course.

Course 1: _____ Instructor Signature: _____
 DEPT NUMBER SECTION

Course 2: _____ Instructor Signature: _____
 DEPT NUMBER SECTION