



## SCHOOL OF MUSIC | UNIVERSITY OF ILLINOIS COURSE OVERRIDE REQUEST FORM

### Instructions

#### To the Student:

1. Complete all the requested information below.
2. Take this form to the course instructor for their signature (or attach to this Form a print-out of an email from the instructor verifying their approval).
3. Return the *completed* form to Jenny Phillips, Academic Affairs, 2048 Music Building.

#### To the Instructor:

Please indicate your approval of the student override request by signing the form below OR sending an email to the student with your approval of their request. (**Please do not email Academic Affairs**).

Student Name: \_\_\_\_\_ Student UIN: \_\_\_\_\_

University Email: \_\_\_\_\_

Semester (check one): \_\_\_ Fall \_\_\_ Spring \_\_\_ Summer Year \_\_\_\_\_

Course Number: MUS \_\_\_\_\_ Section (e.g. A, NM, AD3): \_\_\_\_\_

(1) "Lecture/Laboratory-Discussion," "Conference," "Laboratory," "Practice," or "Independent Study" CRN: \_\_\_\_\_

***or if two numbers . . .***

(2) "Lecture" CRN: \_\_\_\_\_ and the "Discussion/Recitation" CRN: \_\_\_\_\_

Type of registration error: (e.g. Instructor Approval, Time Conflict, etc.)

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Signatures required:

\_\_\_\_\_

Student Signature

\_\_\_\_\_

Instructor Signature

(or attach the Instructor's email permission)

**NOTE: MUS 528B has its own form; please do not use this form.**