

EXCEPTION TO CURRICULUM POLICY FORM

Last Name: _____

First Name: _____

Student ID: _____

Phone: _____

I request to _____ Enroll in over 17 credits

_____ Enroll in less than 2 courses (6 credits)

_____ Enroll in a required course out of sequence (explain below)

_____ Enroll in a course for which I did not complete pre-requisites (explain below)

Reason/Comments _____

Student Signature _____

Required Signatures:

<p>Major Advisor</p> <p>Print Name: _____</p> <p>Signature: _____</p>	<p>Action</p> <p><input type="checkbox"/> Approve</p> <p><input type="checkbox"/> Disapprove</p>	<p>Comments</p>
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<p>Director of Student & Academic Services</p> <p>Print Name: _____</p> <p>Signature: _____</p>	<p>Action</p> <p><input type="checkbox"/> Approve</p> <p><input type="checkbox"/> Disapprove</p>	<p>Comments</p>
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<p>Associate Dean of Academic Affairs</p> <p>Print Name: _____</p> <p>Signature: _____</p>	<p>Action</p> <p><input type="checkbox"/> Approve</p> <p><input type="checkbox"/> Disapprove</p>	<p>Comments</p>
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PLEASE SUBMIT TO:

Office of Student & Academic Services
 38 Prospect Street, Hartford, Ct 06103
 Phone (959) 200-3604
 Email sswstudentservices@uconn.edu