Course Override Form

Fall Term 20_ _ Spring Term 20_ _ Summer Term 20_ _

STUDENT NAME ID# 00_____	CLASS YEAR	MAJOR(S)
LOCAL PHONE #	EMAIL	

IMPORTANT: Independent studies and Internships require special forms.

View Master Schedule www.skidmore.edu/registrar

CRN # (ex. 90479)	UNIT CODE (COURSE #) (ex: PS-101)	UNIT (SECTION) (ex: 001)	TITLE	GRADING OPTION **Letter or S/U?** one S/U per term	ACTION APPROVED Audit a Course or Use Reserved Seat *All other overrides should be done in the system by the instructor*	**SIGNATURE OF INSTRUCTOR**

STUDENT SIGNATURE (REQUIRED)	**DATE**

Honor Code: The Honor code applies to all registration materials.