



PETITION TO ENROLL IN OVERLAPPING COURSES

Admissions & Records Office

Term petitioning for: Fall_____ Spring_____ Summer_____ Year_____

Notice to Student and Instructor: Enrollment will not be allowed for a student’s attendance in two or more courses which meet at the same or overlapping time per Title 5 Section 55007. However, an overlapping schedule may be permitted if the overlapping time is no more than 15 minutes:

a.) rational justification (scheduling convenience is not one) on a student-by-student basis can be established and can be documented. **AND**

b.) the college maintains documentation that each student made up the hours of overlap in the course partially or wholly not attended as scheduled at some other time during the same week under appropriate supervision.

Each time a conflict occurs it must be approved by the instructors (SECTION II), the Area Dean (SECTION III). Time conflicts will be reviewed to determine if the make-up time is reasonable and justifiable.

The completed form must be submitted to the **Admissions and Records Office within the add period**. The student will be notified of the outcome via their Hartnell College student email address.

SECTION I: STUDENT INFORMATION

Student Name: _____ Student ID: _____

Conflicting Courses: No more than two courses may be conflicting

Course Number	Section	Days	Time of Course	Class to be Made Up	Weekly Time to be Made Up	Instructor Name
<i>Example: ENG-1A</i>	<i>1234</i>	<i>MW</i>	<i>8:00-10:00am</i>	<i>x</i>	<i>15 minutes</i>	<i>Oscar Panther</i>
<i>Example: COU-1</i>	<i>4321</i>	<i>M</i>	<i>9:45-10:45am</i>			<i>Norma Cuevas</i>

I request that I be allowed to register in conflicting courses for the following reasons:

I understand that it is my responsibility to make up the time missed at some time during the same week as arranged with the instructor of the course from which I will be missing hours (see next page).

Student Signature

Date

SECTION II: INSTRUCTIONAL PLAN

Faculty proposal of weekly schedule for making up overlapping hours. Please include date, times and place you intend to meet with the student enabling them to gain the instruction missed. The time spent must equate to the same number of instructional hours missed each class meeting per week in order to enable the student to gain the instructional time/content missed.

Classroom time lost to time conflict will be made up as follows:

Days	Times	Weekly Time Made Up
<i>Example: Wednesdays</i>	<i>10 – 10:15 am</i>	<i>15 min</i>

Content to be covered as follows:

The student will make up the time conflict as indicated above and will be under my direct supervision. I understand that, for audit purposes, I must maintain a written record of the make-up time completed by the student in this class.

Instructor's Name

Instructor's Signature

Date

SECTION III: AREA DEAN APPROVAL

Area Dean's Signature

Approved

Denied

Date

Comments:

FORM SUBMISSION

The completed form can be submitted to the Admissions & Records Office at any Hartnell College location or emailed to: admissions@hartnell.edu

FOR ADMISSIONS & RECORDS OFFICE USE ONLY

Dean of Enrollment Services Signature

Approved

Denied

Date