



Office of the Registrar  
 180 Remsen Street  
 Brooklyn Heights, NY 11201

**Special Permission Registration**

<b>Last Name</b>	<b>First Name</b>	<b>Date</b>	<b>Student's (SIGNATURE)</b>	<b>Student's ID #</b>

**Instructions to Student**

This form is to be completed only for registration for terms 20/S1 to 20/FA semesters. Once completed, submit the form via your SFC email account (No Exceptions), to the appropriate administrator for approval. To ensure smooth and fast processing of this form, it must be legible. \*Only one section should be listed on this form. Failure to follow these instructions will result in a delay in processing the form; all requests are completed on a first-come basis.

**APPROVAL:**

- Chairperson's Approval for Pre-requisite Waiver \_\_\_\_\_  Instructor Approval \_\_\_\_\_
- Chairperson's Approval for Section Over-tally \_\_\_\_\_  Athletics Academic Advisor Approval \_\_\_\_\_

**Registration Overload Approval**

- Chairperson's approval for 19 credits \_\_\_\_\_  Academic Dean's approval for 21 credits \_\_\_\_\_

**\*Only one section should be listed on this form.** If the course you are seeking approval for is linked to a required co-requisite (Example: lecture, lab, and/ or recitation), the linked courses will also be considered when seeking approval by the Administrators.

TERM	SUBJECT	COURSE NUMBER	SECTION	COURSE TITLE	CREDITS