PERMISSION TO ENROLL

WESTFIELD STATE UNIVERSITY OFFICE OF THE REGISTRAR

	☐ Fall	☐ Spring	Year:		
Use this form to add a course you were prevented from register into: please check the reason(s):					
☐ Missing pre-requisite or co-requisite ☐ Class Restriction				tion	
•			☐ Need Permission of Instructor		
Note: Do <u>NOT</u> use this form for "reserved closed" or full/closed sections.					
NAME:			CWID:	A	
COURSE:	/ _		/	Section	
CRN	Į.	Prefix	Number	Section	
PRINT INSTRUCTOR NAME					
I give permission for the student named above to enroll in the course listed above, provided <u>space is available</u> .					
FACULTY SIGNATURE:			DATE:		
RETURN COMPLETED/SIGNED FORM: OFFICE OF THE REGISTRAR PARENZO 107					
Processed by: Date:				rev. 02/2010	