



TIME CONFLICT REQUEST

Student First Name Last Name Student ID # Phone

MyWNC will not allow a student to register for a class that has a time conflict with a class the student is enrolled in. This form is to request to be added into a class that has a time conflict with a registered class.

- Instructor and Academic Director signature or email approval (must be attached) required for both classes.
• If after the first week of the semester, form must be submitted within 5 working days of Instructor and Academic Director approval for full-term classes.
• Prior to enrollment in full-term classes after the second week of the semester, payment in full plus a \$25 late payment fee is required.
• Final deadline to submit this form

Current Class that conflicts with class request ed to add:

Course Registration Number (i.e. 32876) : Prefix/Number (i.e. BUS 101) : Credit Audit

Times/days class meets:

Instructor Name (print) Instructor Signature: or email attached

Academic Director