

COMPUTING AND SOFTWARE COURSE CONFLICT FORM

	Program & Level:	
Student #:	McMaster E-mail:	@mcmaster.ca
Phone:	Term:	
	BE COMPLETED BY THE STUDENT. e following two courses that have timetable confl	licts:
Course 1:	Lecture Section: Lab Section	on: Tutorial Section:
	olled in this course quisites for this course	
Course 2:	Lecture Section: Lab Section	on: Tutorial Section:
	olled in this course quisites for this course	
Reason why you are re	equesting to register in two courses with conflicti	ng schedules:
I accept responsibility for components.	or the academic risks involved in registering in t	wo courses with conflicting
•	Date:	
	Date	
	GNATURES, THEN E-MAIL TO casug@mcma	
GET INSTRUCTOR SIG	GNATURES, THEN E-MAIL TO casug@mcma	aster.ca.
GET INSTRUCTOR SIGNATURE (Course 1):	GNATURES, THEN E-MAIL TO casug@mcma	aster.ca.
GET INSTRUCTOR SIGNATURE (Course 1): Name: Instructor (Course 2):	GNATURES, THEN E-MAIL TO casug@mcma	aster.ca. Date:
GET INSTRUCTOR SIGNATURE (Course 1): Name: Instructor (Course 2):	GNATURES, THEN E-MAIL TO casug@mcma Signature: Signature:	aster.ca. Date:
GET INSTRUCTOR SIGNATURE 1): Name: Instructor (Course 2): Name: DEPARTMENTAL AUT	GNATURES, THEN E-MAIL TO casug@mcma Signature: Signature: THORIZATION:	Date: Date:
GET INSTRUCTOR SIGNATURE 1): Name: Instructor (Course 2): Name:	GNATURES, THEN E-MAIL TO casug@mcma Signature: Signature: THORIZATION: Department Signature:	Date: Date:

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