

## **Course Time Conflict Approval Petition**

Admissions and Records 2088 North Beale Road, Marysville, CA 95901 (530) 741-6720

						(-	550/741-0720	
Date:		Fall:	Spring	g:	Sumr	mer:	_20:	
Student Nam	ie:		Student ID#::					
Student Instructions:								
tenuating circe stance and wis of the class in signed by the	umstances (so sh to petition which you wil student and in the petition	nave a time conflict is p cheduling convenience to take a course that c Il <b>"miss"</b> the regularly s nstructor. Submit the f <b>prior to the dead-line</b> f	is not accepta onflicts in tim scheduled tim form to the A	able). If yo e, you mu e. All sec dmissions	bu believe you ust discuss you tions of this fo & Records Of	have an extenuat ar situation with th orm must be filled fice for final appro	ting circum- ne instructor out and oval. Make	
In courses (other than television/media), the student must make arrangements with the instructor to make up the hours of overlap/conflict at some other time during the same week that time was missed.								
Regular (non television/media) class: I am petitioning to take two Yuba Community College District classes at overlap- ping or conflicting times. I have read the information above and will make arrangements with the instructor to make up the hours missed at some other time during the same week the time will be missed.								
Class Code	Dept & No.	Title of Class	Instructor	Days	Times of Class	Check Class To Be Made Up	Weekly Time To Be Made Up	
(EXAMPLE): 3524	MUSIC 15	Popular Music in the US	J. Abigana	MW	4:00PM-5:15PM	х	15 minutes	
(EXAMPLE): 3460	ENGL 51	Preparatory Comp and Read	T. Schmits	MW	5:00PM-6:50PM			
To be completed by student: My extenuating circumstance for this request is (scheduling convenience is not acceptable per California Title 5 regulation):								
Date Signed Student Signature								

Office Use Only: REV. 04/2020 Television/Media Course

Regular Course

## TO BE COMPLETED BY INSTRUCTOR OF OVERLAPPING CLASS:

If the student provides sound justification and if you are willing to allow this student to enroll in a course that conflicts with your course, **please document how and when the time missed from your course will be made up by this student.** Per Title 5-section 55007, the college requires "documentation describing the justification for the overlapping schedule and showing that the 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 the supervision of the instructor of the course."

DAYS	TIMES	WEEKLY TIME MADE UP	COMMENTS				
(EXAMPLE): Wednesdays	(EXAMPLE): 7:00- 7:10PM	10 Minutes	(EXAMPLE): Student will meet with me for 10 minutes after class to review coursework missed in class.				

## **Instructor Use Only:**

In order for the college to receive FTES funding for this student's enrollment in your class, the college may permit the overlapping schedule if (a) rational justification (scheduling convenience is not acceptable) on a student-by-student basis can be established and is documented by the faculty and (b) the faculty maintains documents that the 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 (see below).

Instructor of Overlapping Class - Print Name

Instructor of Overlapping Class - Approval Signature

Date Signed

Action of the Admissions and Records Office:

□ Approved

Denied

Admissions and Records - Approval Signature

Date Signed