Department of Mathematical Sciences
Permission for Enrollment in a Closed Section
Spring 2019

Part I. To be completed by the student.

Name____________________ I.D#____________________________

Course Requested: ______________________ Section _____ CRN _____________

I have completed the prerequisite for this course by:

___________ completing the course at CCSU with a grade of C- or better (B- or better to go from Math 101 to Math 119).

___________ transferring the credit from ___________________________)

___________ taking the placement exam on _________________________

Explain any special circumstances:

Take this form to the instructor during the first week of classes to seek the instructor’s approval.

_______________________________ Date _______________
(Instructor’s signature)

Part II. To be completed by the instructor.

I hereby give permission to this student to over enroll in the above section of my class based on the completion of the said prerequisite:


Part III. After the instructor signs, bring this form to the Math Department in Marcus White Hall, Room 128.

NOTE: If it is found that you do not have the prerequisite for the course, you will not be allowed to register for the course.