



VANDERBILT Blair School of Music

Petition to Enroll with
Time Conflict

Student Name _____ Student ID _____

Semester/Year _____

I am requesting permission to be registered for the following courses that overlap by
_____ minutes per week:

Dept/Subject	Course Number	Section	Meeting Days/Times
_____	_____	_____	_____
_____	_____	_____	_____

Reason for request and explanation of how requirements of both courses will be fulfilled:

Faculty Approval:

Course # Instructor Signature

Course # Instructor Signature

Blair Associate Dean Signature

*Email completed form to:
Blair School of Music
Office of Academic Services
(rachel.hobbs@vanderbilt.edu)*