
Department of Political Science

OVERRIDE AUTHORIZATION FOR POLITICAL SCIENCE

SEMESTER:

SUMMER (I OR II)

FALL

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NAME PID MAJOR/COLLEGE

PHONE # EMAIL CLASS LEVEL

OVERRIDE FOR:

PLS _____

SECTION _____

OF CREDITS _____

REASON(S) FOR OVERRIDE:

INSTRUCTOR'S SIGNATURE DATE

INSTRUCTOR'S NAME (PRINT)

OVERRIDE ISSUED BY DATE

STUDENT NOTIFIED BY: EMAIL PHONE OTHER: _____