College of Journalism and Mass Communications

COURSE OVERRIDE REQUEST

This form must be completed to request an override into any course in the College of Journalism and Mass Communications. Override's can be requested to enroll in courses where you do not meet the pre-requisites, the course if full or the course conflicts with another class requirement.

Name:	NUID:	College:	
Email:	Phone:	Major:	
When do you plan to gra (ex. May 2024)	duate?		
Course Number: (ex. JOMC 101)		Course Title: (ex. Principles of Mass Media)	
Section Number: (ex. 002)		Instructor:	
Term:		Year: (ex. 2024)	
Reason for Override:			
Explain Other:			
Please provide a detailed	d explaination of	the reason for your request:	
Have you spoken with th	ne faculty membe	er about this override?	
Advising Approval:	College Ap	proval: Faculty Approval:	