**Registration Permission**

*To Be Used During Registration When Instructor Signature is Required*

**FACULTY:** Signing this form constitutes express permission for the student named to register for the course and section indicated, regardless of enrollment cap, restrictions or pre-requisites.

**STUDENTS:** Once signed, this form must be presented *in person* to the registrar’s office staff so that you can be officially registered.

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**Student Name (print legibly):** ____________________________  **ID Number:** ________________  **Class Year:** ______

<table>
<thead>
<tr>
<th>CRN</th>
<th>Subject</th>
<th>Course Number</th>
<th>Section</th>
<th>Lab Section</th>
<th>Title</th>
<th>Instructor’s Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample</td>
<td>10125</td>
<td>CHEM 101</td>
<td>B</td>
<td>D</td>
<td>General Chemistry I</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Office of the Registrar • 103 Lathrop Hall • 315-228-7408
Regular Office Hours: 8:00 – 12:00 and 1:00-4:30