

## ANDREWS UNIVERSITY CLASS CONFLICT FORM

NAME \_\_\_\_\_

ID# \_\_\_\_\_

INSTRUCTIONS: No class conflict will be considered unless the following information and signatures are obtained:

- A) List both classes that conflict
- B) Both teacher's signature
- C) Dean's signature(s)
  - a. (If classes are in two different schools, you must obtain **both deans' signature**)

Course Acronym & Number	Course Title	Credits	Days (circle)	Time
			M T W R F	
			M T W R F	

**TEACHERS' SIGNATURE**

**DEANS' SIGNATURE**

\_\_\_\_\_ Date

\_\_\_\_\_ Date

\_\_\_\_\_ Date

\_\_\_\_\_ Date

**SOLUTIONS:** \_\_\_\_\_

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**SOLUTIONS:** \_\_\_\_\_