NEW MEXICO TECH – Instructor Permission Form

Name	ID#	Se	mester 20	
(Last) Email Address	(First)			
I hereby give my permission	for the above student to enroll in	:		
Course Ref. Num. De	pt. Name & Course #	Section	S <u>em. Hrs.</u>	
Raason for Override: (signat	ture needed on line being need	ed: WILL NOT accent it	wrong line signed)	
	_		wrong nne signeu)	
	((Instructor Signature & Date)		
%Instructor & Advisor approv	al needed			
	(Instructor Signature	& Date) (Advisor Sig	nature & Date)	
‰ Time Conflict				
Instructor sig needed of both courses : (Instructor	uctor 1 Signature & Date)	(Instructor 2 signature	& date)	

REVISED 11/2020