Lewis & Clark College Graduate School of Education and Counseling Office of the Registrar

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E-mail gradreg@lclark.edu
http://www.lclark.edu/graduate/offices/registrar

Registration Prerequisite Substitute/Waiver/Substitution Consent Form

Student Name:				Student ID #:	
Student Email:				Phone:	
TERM:					
TO BE FILLED IN BY INSTRUCTOR/ADVISOR/DEPARTMENT CHAIR:					
This student has consulted with me and has my consent to register in the following course:					
DEPT	COURSE#	SECT#	COURSE TITLE		INSTRUCTOR (please print)
This student has consulted with me and has my consent to substitute a course for required course in their program:					
DEPT	COURSE #	COURSE TITLE		TO SUBSTITUE FOR (DEPT & COURSE #)	IN THIS ACADEMIC PROGRAM
Consent to register over the course limit: Consent to register over the course limit:					
2. Consent to register over the course limit: (Instructor/Advisor signature) Advisors must notify the instructor of record if authorizing a student to register over the course limit.					

- The Registrar's Office will register you at your registration appointment day or the following business day after this form is submitted.
- If the course is full, you will be added to the WAITLIST, unless the instructor has given consent to register you over the course limit.

You MUST submit this form to your Academic Department Office.