



Office of Instruction

Override Notice

This form is to be used when a pre-requisite/test score error override is requested of the Office of Instruction.

Date:	
Student Name:	
ID Number:	
CRN/Course Name of Course to be Overridden:	
Reason:	
Advisor/Instructor/VP of Instruction Making Request:	
This section is to completed by individual completing the Banner override:	
Override Entered by:	
Date Entered:	
Signature of Person Making Change:	

**This form is to be filed with and held by the Office of Instruction.*