Oklahoma State University Department of Theatre
Contract for DANC 1200
This form must be filled out prior to enrolling.

This agreement permits _______________________ (student) to enroll in:

DANC 1200 (Lower Division)

for _____ (one or two) credit hours (DANC 1200)
during the ___________ (fall, spring or summer) term of the ___________ Academic year.

Description of course:

Objectives:

**Method of Project Evaluation:** (Include required projects, papers, etc. required for receiving grade.)

Approvals:

___________________________________ (Student) ____________________ (Date)

___________________________________ (Instructor) __________________ (Date)

________________________________________________________________________

Numbers will be provided after the course is approved.

CRN ___________________       CWID ___________________
expires: _____________

registration permission memo

date: ____________________

to: Office of the Registrar
322/324 Student Union
Stillwater, OK 74078

from: ____________________

from: ____________________

print Name of school       official print Name of school official

Professor and Dept. Head

title of school official

title of school official

signature of school official

signature of school official

re: permission for registration exception

the following student ______________________________________________ i ______________________________________

(Student Name)                                                                                         (Student ID)

has my permission to enroll in the following course(s), as long as total enrollment for the course does not exceed the classroom fire code limits:

<table>
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<tr>
<th>CRN</th>
<th>Prefix</th>
<th>Course Number</th>
<th># Credit Hrs</th>
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This permission applies to enrollment for the ___________ __________ term due to an exception of the following restrictions (check all that apply below and ensure appropriate signatures are included for each):

[ ] Department permission required (requires department head signature) - beginning Fall 2016, department heads/designees provide via Banner INB.

[ ] Instructor permission required (requires instructor signature) - beginning Fall 2016, instructors provide via Self-Service or department head/designees provide via Banner INB.

[ ] Class time conflict (requires permission from instructors of both courses involved in time conflict).

[ ] Override prerequisite/corequisite _______________ (requires instructor or advisor signature; provide rationale below) - beginning Fall 2016, instructors provide via Self-Service or department heads/designees provide via Banner INB or advisors provide via Advisor Prerequisite Override From on Registrar SharePoint site.

Andrew Kimbrough
Professor and Dept. Head
If you have any questions, please contact __________________________ at 405-744-__________.

___________________________________________________________  ____________
Student Signature                                           Date

___________________________________________________________  ____________
Advisor Signature *(required after nonrestrictive drop/add deadline)*  Date