

PRINT STUDENTS LAST NAME, FIRST NAME & M.I	PERMISSION NUMBER	SEMESTER/YEAR
STUDENT'S ID NUMBER	COURSE NAME	UNITS
	<b>Permission Number &amp; Attendance Verification</b>	
STUDENT'S SIGNATURE		
<p><b><u>INSTRUCTIONS TO THE STUDENT:</u></b> 1. Present this form to the Admissions Office immediately along with a photo ID.  2. This form must be processed within 10 business days from the instructor's signature date.</p>		
Approval to Exceed Unit Limit by: _____	<p><b>PLEASE ADD THIS STUDENT TO MY CLASS</b>  <b>The student has been attending since before Census.</b></p>	
Counselor: (print name) _____ Counselor: Signature _____	<p>_____</p> <p>INSTRUCTOR'S NAME PRINTED</p>	
A&R OFFICE USE ONLY:	<p>_____</p>	
_____	<p>INSTRUCTOR'S SIGNATURE</p>	<p>DATE</p>
Additional Notes/ Effective Date / A&R Initials		