Illinois Eastern Community Colleges

Registration Override Request Form

Students: Complete this form to request an override of a message or error encountered during self-service registration.

Name: _____
       (Last)   (First)   (Middle)

IECC ID Number: _____ email: _____ @iecc.edu

Instructions: Provide the Course Reference Number (CRN), course number, type of registration override (Permit Code) you are requesting, and the semester/year you were registering for when the message/error was encountered. You may use 1 form for up to 4 courses. Your signature is required. Submit this form to your advisor for approval.

An email will be sent to your @iecc.edu account notifying you of the final decision. **Approved requests allow for an override of the issue and does not register you for the course – it is your responsibility to register for the course**.

CRN	Course Number	Permit Code (select from chart below)	Registration Semester/Year

For this Message/Error ➡	Use this Permit Code	Permit Code Description (For Reference Only)
Co-requisite	**CO-REQ**	Co-requisite override
Duplicate Course	**DUPL**	Duplicate course override
Pre-requisite Course or Test Score Required	**PRE-REQ**	Pre-requisite override
Repeat Count Exceeds 0	**REPEAT**	Repeat override
Restriction by major/program of study	**RES MAJ PR**	Restriction Override for Major or Program
Time Conflict	**TIME**	Time conflict override

Student Signature: _____ Date: _____

___ Approved ___ Denied Advisor Signature: _____ Date: _____

Notes: _____

_____

Registration and Records Office Use Only

_____ Override Processed in SFASRPO   _____ Student emailed

Processed by: _____ Date: _____