

AUMPathway Registration Override Form

Override forms are required for undergraduate students who wish to enroll for graduate courses during their AUMP:

Note: This form does not actually enroll y given the override clearance from Gradu	_	e responsible for enrolling	online after you are
V#			
Last Name:, First Name:			
I am requesting permission to take	: credit hours during		Term, 20
Proposed Sche	edule of Classes (List <u>all</u> courses i	FOR THE PROPOSED TERM):	
CRN	Prefix Course Title	CREDITS	
By typing your name below, you ce	ertity this is valid as your signati	ıre: ⊔	
Student's Signature:		Date:	
•••••			
	Graduate Office Use On	ly	
Processed: ☐ Unable to Process		-	
Date:			
AUMP Override Code:			

Created June 17, 2021