

## Registration Override Request Form for Non-COE students

### PART I. To be completed by the student

Name: Snell Sydney NUID: 001234567  
Last or Family Name First or Given Name

E-Mail: s.snell@northeastern.edu NU College / School: Bouve College / Community Health & Behavioral Sciences

#### Check All That Apply:

MS  PhD

Course Name	Term	CRN #	Subject Code	Dept./Course #	# Credits
Systems, Signals, and Controls	Fall 2023	38266	BIOE	5800	4

If more than one section is offered, please list the CRN # of your 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> section choice

2<sup>nd</sup> Choice: 37557 3<sup>rd</sup> Choice: 38713 4<sup>th</sup> Choice: 36139

**Reason (required field):** *(In this section, students should explain their reason for taking a course in the College of Engineering).*

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#### Check all that apply:

- Field of Study or Program Restriction** (Course is restricted to students of a certain program.) **College**
- Restriction** (Course is offered by another college.)
- Pre-requisite Restriction** (Course has a pre-requisite that you haven't taken at NEU.)
- Student Attribute Restriction** (video streaming courses.) See instructions on previous page.

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**PART II. Signatures Required by the Instructor**

Instructor:  Approved  Denied (If denied, please provide comment below)

Comment:

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Name	Signature	Date
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**PART III. Signatures Required by Student's College / Department**

Student's College / Department:  Approved  Denied (If denied, please provide comment below)

Comment:

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Name	Signature	Date
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**PART IV. Signatures Required by the Graduate School of Engineering**

Graduate School:  Approved  Denied (If denied, please provide comment below)

Comment:

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Name	Signature	Date
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