ASL COURSE RESTRICTION OVERRIDE REQUEST

This form should be used in either of the following cases: (1) You have completed one or more ASL courses at another high school, college, or university within the past two years. (2) You are currently enrolled in an ASL course outside ASU and intend to continue ASL at ASU. Print and complete this form then fax or deliver it with transcripts to the Department of Speech & Hearing Science.

If you took ASL in high school, you are only eligible to be placed in SHS-102.

FULL NAME: ____________________________________________________________

ASU ID #: ______ ______ ______ ______ ______ ______ ______ ______ ______

What SEMESTER and YEAR are you making this request for?

YEAR: ____________  SEMESTER: ______________________________

Check the LEVEL you are seeking to enter:  ○ 102  ○ 201  ○ 202

EMAIL ADDRESS: __________________________________________________________________________

I affirm that all of the information I am providing with this request is accurate and that these courses were completed within the past two years and/or are currently in progress. For completed ASL courses, I have earned a 'C' or better. If I am using proof of registration in a current ASL course to obtain this CRO, I will only use this CRO if I complete the proposed course with a 'C' or better. I understand that if this CRO is issued, it will only remove the registration block. I am receiving no transfer of unit credit. I am still responsible for registering in the class I want. If the class I want is full, I understand that I will not receive a “course full override.” I understand that the Department of Speech & Hearing Science reserves the right to rescind this override and/or cancel my registration.

SIGN HERE>> ________________________________________________  DATE>> _________________

Please allow 3 days for this paperwork to be processed. You will not receive confirmation from our department. If the restriction is still in place after 3 days, you may contact the department for additional information. Once processed, this form and your transcripts will be destroyed. This information is not kept on file.

FAX THIS FORM WITH TRANSCRIPTS SHOWING COMPLETION OR CURRENT ENROLLMENT IN THE RELEVANT ASL COURSES TO (480) 965-8516. You may also hand deliver it to the SHS office on the second floor of Coor Hall. Unofficial transcripts will be accepted. Please circle your ASL classes.

QUESTIONS? Contact the ASL Program at shasl@asu.edu

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