

Permission to Enroll Form

Instructor:

Class Number:

# Permission to Enroll

Instructor: \_\_\_\_\_ Semester: \_\_\_\_\_

Subject and Catalog Number: \_\_\_\_\_ Section: \_\_\_\_\_ Class Number: \_\_\_\_\_

### Submit this list of approved names to your department administrator.

Students will receive notification on the SOLAR System when permission is assigned; they will receive email notification as well if they maintain a current email address through the SOLAR System. Once permission is assigned, students must register themselves through the Web or telephone. ***Note: Instructors should not exceed the room capacity in signing students into their classes. Class rosters include current enrollment total.***

Students should not be referred to Registrar's office  
Registrar's Office WILL NOT process these transactions.

Student Name:

(CAPITALIZE last name)

Stony Brook ID

Email Address

Student Name: (CAPITALIZE last name)	Stony Brook ID	Email Address
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