



WAYNE STATE

School of Social Work

Complete the form below to request a course override from a School of Social Work academic adviser.

Contact Information:

First Name

Last Name

E-mail Address

Phone Number

Student ID/Access ID

Student Status Check One:

BSW	MSW	Non-SW Students Bachelor's Master's PhD Please include your college/department below:
Full Time	Full Time	
Part Time	Part Time	
Main Campus	CORE	
Macomb Campus	Advanced Standing	
WOW!		

Please provide the following information about the course you want to register for :

Course Prefix (e.g. SW)

Course Number (e.g. 3010)

Course Reference Number (CRN)

Error Code

Course Section (e.g. 002)

What term do you want to register for this course?
(e.g. Fall 2021)

Questions or Comments: