Course Change/Add Request Form

Name: _____   Date: _____

TERM: _____ COURSE: _____ CRN: _____

Please Change*:

Day(s) of the week   Change to: _____

Time of Day   Change to: _____

Location   Change to: _____

Grading mode*   Change to: _____

Term taught   Change to: _____

Capacity   Change to: _____

Add instructors   Add: _____

Remove instructors   Remove: _____

Adjust Credits   Change to: _____

Other   Explain: _____

Add Course to Schedule of Classes

Term: _____ Course Prefix/Number: _____ Course Title: _____

Number of sections: _____ Credits: _____ Grading Mode (A-F or P/N): _____

Instructor(s): _____

Day/Time: _____ Campus: _____

Capacity: _____ Waitlist Capacity (recommend 10% of capacity): _____

Section Title (Reading and Conference only): _____

Restrictions: _____

*Please note that substantive changes, such as to grading mode, etc., must be brought to Curriculum Committee