



COURSE SCHEDULE CHANGE REQUEST

This form is for use by an Academic Dean to request changes in the current course schedule.

SCHOOL _____ SEMESTER _____ Year _____

ADD (New course not listed in schedule)

Course & Section	Instructor	Meeting Days	Meeting Times	Room	Capacity
		M T W R F			
		M T W R F			
		M T W R F			
		M T W R F			

DELETE (Listed course to be removed from schedule)

Course & Section	CRN	Rationale for Deletion

REVISIONS

COURSE 1 _____ **CRN** _____

	FROM	TO
Instructor		
Meeting Days	M T W R F	M T W R F
Meeting Times		
Meeting Room		
Room Capacity		

COURSE 2 _____ **CRN** _____

	FROM	TO
Instructor		
Meeting Days	M T W R F	M T W R F
Meeting Times		
Meeting Room		
Room Capacity		

COURSE 3 _____ **CRN** _____

	FROM	TO
Instructor		
Meeting Days	M T W R F	M T W R F
Meeting Times		
Meeting Room		
Room Capacity		

Instructor Sign/Date:	
School Dean Sign/Date:	

FOR OFFICIAL USE ONLY

Changes recorded by Registrar's Office Name _____ Date _____