

Request for Course Addition

Approved By: _____

Department Head: _____ Date: _____ Dean of School: _____ Date: _____

Vice President for Academic Affairs: _____ Date: _____

Please forward request by e-mail

Term	Subject		Course #	Section	Title (maximum 30 characters)			Will the request require funds from Academic Affairs? YES____ NO____ If yes, please justify:			
Days	Begin	End	Building	Room	Instructor	T#	Enroll Limit	Instructional Method, if Web, <i>Mixed Tech</i> , eTech, etc.	Location if course is meeting off-campus (be specific)	If different from term	
	Time	Time								Begin Date	End Date
						T		<i>If MT, 49 or 99</i>			

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