

Course Request Form

TERM:		NOTE: To avoid delay in completing the Class Schedule Bulletin, be sure to complete all necessary course information, including 4-digit course numbers, meeting days/times, enrollment cap/max, classroom preferences, instructor names, cross listed sections with overall cross list enrollment max. Please list special topics titles and/or comments to be published.
Department:		
Chairperson Approval:	Date:	
Dean's Approval:	Date:	
Provost's Approval:	Date:	

Please note: It is the department's responsibility to monitor and track all course offerings proposed as off-campus courses. This includes extension, contract and cohort courses. If 50% or more of a curriculum is offered off-campus, the request for the body of course work must go through the University Curriculum Coordinating Committee and receive appropriate authorization, which may include submission to IBHE.

Subject	4-Digit Course No.	Course Title	Course Cues	Course Cr Hrs	Day(s) Course Meets	Time Course Meets	Preferred Location / Room Type	Instructor(s) List ALL instructors for this course. Include cue distribution.	Instructor(s) UID	Enrl Cap Max (#stud)	Publish/Print in Schedule Yes/No