

SCHEDULE CORRECTION

FALL _____ SPRING _____

ADD _____ **CRN** _____
For new sections and changes to the method, session, or campus.

<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>							<input style="width: 100%;" type="text"/>
COURSE-SECTION	TITLE							DEPT PHONE
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
METHOD	PERMISSION	SESSION	STARTS	ENDS	CREDIT HRS	SELECT LAB	ENROLLMENT	
PRIMARY	M	T	W	R	F	S	U	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	DAYS			START TIME	END TIME	BUILDING	ROOM	
SECONDARY/ LAB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SECONDARY/ LAB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PRIMARY INSTRUCTOR	<input style="width: 100%;" type="text"/>			<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
	LAST			FIRST	MIDDLE	M#	CATEGORY	
SECONDARY/LAB INSTRUCTOR	<input style="width: 100%;" type="text"/>			<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	

CHANGE _____ **CRN** _____
Changes to the items below. Only complete fields with changes.

<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>							<input style="width: 100%;" type="text"/>
COURSE-SECTION	TITLE							ENROLLMENT
PRIMARY	M	T	W	R	F	S	U	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	DAYS			START TIME	END TIME	BUILDING	ROOM	
SECONDARY/ LAB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SECONDARY/ LAB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PRIMARY INSTRUCTOR	<input style="width: 100%;" type="text"/>			<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
	LAST			FIRST	MIDDLE	M#	CATEGORY	
SECONDARY/LAB INSTRUCTOR	<input style="width: 100%;" type="text"/>			<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	

DELETE/INACTIVATE _____

<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
CRN	COURSE-SECTION	CREDIT HRS	DELETE	INACTIVATE	BLACKBOARD COURSE

Remarks

1) _____
 Chairman Date

3) _____
 Academic Affairs Date

2) _____
 Dean Date

Official Use Only
Completed _____ Called _____ Faxed to BB _____