# Request for Change(s) in Class Schedule

All items marked with an * are required
FAX completed form to ISIS records at Ext. 3030

**Please Note:** to change a title and/or catalogue number you must use the “Request to Add/Change a Course in Course Catalogue” form. Do not use this form.

## Course Information

- [ ] Schedule a course  
- [ ] Cancel Course  
- [ ] Change published scheduled meeting time/days.

*Term __________________________  
*CE Session __________________________

*Subject Area ________________  
*Catalogue Number ______________________

*Course Title as it exists in the course catalogue:
________________________________________________________________________
________________________________________________________________________

*Instructor: ____________________________  
First Name  
Last Name

## Meeting Patterns*(all information is required)

- [ ] Monday  
- [ ] Tuesday  
- [ ] Wednesday  
- [ ] Thursday  
- [ ] Friday  
- [ ] Saturday  
- [ ] Sunday

Meeting time start ________________  
Meeting time end __________________

Final Exam required? __________

Location  
- [ ] North Campus  
- [ ] South Campus  
- [ ] Off Campus  
- [ ] On Line

Comments ________________________________________________

Maximum Enrollment allowed_________  
Permission numbers requested_________

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*Chairperson/Coordinator Signature  
*Date

*Dean Signature  
*Date

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**Records Office Use:**

Course entered by: ____________________________  
Date: __________________________

Course ID: __________________________