

**Course Add/Change Form**

College: \_\_\_\_\_ Department: \_\_\_\_\_ Year: \_\_\_\_\_ Term: \_\_\_\_\_

Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Date: \_\_\_\_\_

**Edit:**  
A = Add course  
D = Delete/Cancel course  
C = Change

**Instr. Mode:**  
P = In Person  
01 = Online only – TBA Mtg Pat  
02 = Online only – w/ Mtg Pat  
03 = Online – TBA w/ Few Campus Mtg  
04 = Online – Mtg Pat w/ Few Campus Mtg  
05 = 2Pat-Mtg Pat & TBA  
06 = 2Pat-Mtg & OL Pat  
10 = Online only – 2Pat  
11 = Online-2Pat

**SUMMER ONLY**  
**Dates:**  
10 wk = 10 week course  
5 wk1 = First 5 week course  
5 wk2 = Second 5 week course

**\*Please note:** All columns in a row must be completed only when adding a new class. If you require more rows, submit an additional form (no need to fill out top section).

Edit	Course Subject	Sec #	Component (Lec/Sem/Lab /Act/Sup)	Unit Value	Class Assoc #	Instr. Mode	Sched Print (Y/N)	Mtg. Pattern	Start Time	End Time	Empl ID (required to add Instr)	Enroll Cap	Consent Type (D/N)	Room Preference*	Dates (Summer only)	Comments: (LAB room, Class notes #, Class Topic, Off Campus)
A	EXAMPLE	01	LEC	3.0	1	P	Y	TR	0800	1000	TBA	5	D	MH 324	5 wk1	OFF CAMPUS, CLASS NOTE: 61, 97

\*Room will be scheduled on available basis.  
\*\*Required signatures – If signatures are missing request will be returned.  
A template of this form is also available in Docusign.

Dean’s Signature or College Rep\*\*: \_\_\_\_\_ Chair’s Signature\*\*: \_\_\_\_\_