CLASS INFORMATION CHANGE FORM

Please use this form for:

- Additions to the Schedule
- Change in Times or Days
- Course Cancellation
- Adjunct or Overload Instructor Changes
- Building/Room Request

Please submit the following types of changes via email: instructor changes, course capacity, title change (for topics courses), credit hours (for variable credit courses), writing unit status, etc. Send emails to jcronin@muskingum.edu.

<table>
<thead>
<tr>
<th>*Semester ________</th>
<th>*Year ________</th>
<th>Today’s Date _________________</th>
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<tr>
<th>*Course Prefix ______</th>
<th>*Course # ______</th>
<th>*Section ______</th>
<th>Credit Hours ______</th>
<th>Crs. Capacity ______</th>
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Course Title___________________________________________________

*Required fields

Existing Information:

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<tr>
<th>Professor_______________________________</th>
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<th>Building/Room___________/_______________</th>
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<th>Days_______________________________</th>
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<th>Time_______________________________</th>
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Reason/Need for Change:

______________________________________________________________________

Required for Room Change:

Have you checked to see if room is available and has the resources needed?

Yes ☐ No ☐ N/A ☐

Required for Instructor Change:

This course will be taught:

- ☐ In-Load
- ☐ Overload
- ☐ Adjunct

Division Coordinator consulted?

YES ☐ NO ☐

Department Chair Signature______________________________ Date_____________________

VPAA Approval_______________________________________ Date_____________________

Registrar’s Approval____________________________________ Date_____________________

For office use only.

☐ Datatel   ☐ R25   ☐ Instructor/Dept.Chair/Secretary   ☐ Registered Students

Revised 09/11/09 JRC