SCHEDULE ADDITIONS, DELETIONS, AND/OR CHANGES

Action: Add—Delete—Change (Circle One)							S	Semester			
PLEASE NOTE:						School					
For ch	ange – L	ist CF	RN, Subject/number/section,	and indica	ate cha	nge.					
For ac	ld – CRN	numl	per will be assigned by system	m							
CRN	Subject/ Number	Sec	Course Title	Max	Day	Time	Bldg/Room	Instr Name/SSN/ID	Cross Ref	Fee	Permission Notes
Department Coordinator			Date	Date				Dean			Date