Session
_____ A (6 weeks)  _____ C (6 weeks)
_____ A (8 weeks)  _____ Other
_____ A (10 weeks)

Department and Course Number: ____________________________________________________

Estimated Enrollment: _________

Course Title: ____________________________________________________________________

General Catalog Course?   Yes / No

If not, Undergraduate or Graduate Council Approval Requested: ________________________

Class Meeting Days and Hours: ______________________________________________________

Room Capacity: _________  Preferred Room: __________________________________________

Audio Visual, Computer Time, or Other Special Needs: _________________________________

TA, Reader, or Honoraria Needed: ____________________________________________________

Course Description Note:
Notes may be added to follow the official description; for example, English 110: Studies in Individual Authors could have a note describing which authors will be covered in the summer course.

Note to follow course description: __________________________________________________________________________

____________________________________________________________________________________________________________

Restrictions:
_____ Instructor Consent  _____ Enrollment Limit
_____ Department Consent  _____ Other

Instructor or Department Consent:
Indicate if written approval or assignment of a PTE number prior to enrollment is required of all students. May be used to select a particular type of student or to screen for necessary requisites, class level, or major. Not to be used as a method to limit the size of the class. Instructor Consent is administered by the instructor; Department Consent is administered by academic department staff. Used infrequently in the summer.

Enrollment Limit:
Enrollment limits should not be offered in the summer except in special circumstances. Not to be used as a method to screen for a particular type of student. Students are moved automatically from the wait list in enrollment order as space permits.

Submitted by: _______________________________  Date: _________________

Received in department by: _______________________________  Date: _________________