

NEW SECTION FORM

Term:

Date:

Subject:

Course Number:

Credits:

Course Title:

Length of Course: **weeks**

Begin Date: **End Date:**

Part of Term:

Course Type:

Instructional Method:

Primary Instructor: **PID:**

Secondary Instructor: **PID:**

Approved Lab Fee:

Noncredit Tuition:

Meeting Times:

Day(s)	Begin Time	End Time	Building	Room
		to		
		to		
		to		

Restrictions:

(e.g., POI required, majors only, freshmen only. If changing restrictions on the catalog level, please use a **course change form**.)

Capacity:

Waitlist Capacity:

Change Approved By:

(Chair/Director or Designee)