

COURSE REQUEST FORM
Planning Sheet for _____
(Term and Year)

Filled out form.

Print form and take it with you to meet with your academic advisor.

Sign the form after the approval of your advisor.

Name _____

ID# _____

CRN	Dept	Crse #	Section	Title	Audit/Pass-Fail

Student Signature

Advisor Signature

Alternate Courses:

Planning Area: