

# AstraChange Request

**PLEASE DO NOT LEAVE ANY BLANK SPACES, ALL REQUESTED INFORMATION IS NECESSARY!**

Dept: \_\_\_\_\_ Name/phone: \_\_\_\_\_ Year: \_\_\_\_\_ Semester: \_\_\_\_\_

**ADDITION:** SUPPRESS CALL # ? \_\_\_\_\_

SUBJECT COURSE# SECTION# CREDITS COURSE TITLE MAX ENROLLMENT

TIMES DAYS BUILDING ROOM SPECIAL COURSE FEE

PRIMARY INSTRUCTOR NAME, R# & % \_\_\_\_\_

Additional INSTRUCTOR Name, R# & % \_\_\_\_\_

Footnote: \_\_\_\_\_

HYB\* ONL WEB WEO\* WPR\* (\* MEETING DATES REQUIRED)

COMMENTS: \_\_\_\_\_

**CHANGE:** SUPPRESS CALL #? \_\_\_\_\_ ASSIGNED CALL # \_\_\_\_\_

SUBJECT COURSE# SECTION# COURSE TITLE

**From:**

TIMES DAYS BUILDING ROOM CREDITS MAX ENROLLMENT

INSTRUCTOR NAME, R# & % (for all) \_\_\_\_\_

FOOTNOTE: \_\_\_\_\_

**To:**

TIMES DAYS BUILDING ROOM CREDITS MAX ENROLLMENT

INSTRUCTOR Name, R# & % (for all) \_\_\_\_\_

FOOTNOTES: \_\_\_\_\_

HYB\* ONL WEB WEO\* WPR\* (\*MEETING DATES REQUIRED)

COMMENTS: \_\_\_\_\_

**CANCELLATION-OF-ENTIRE-SECTION:** ASSIGNED CALL # \_\_\_\_\_

SUBJECT COURSE# SECTION# CREDITS COURSE TITLE MAX ENROLLMENT

TIMES DAYS BUILDING ROOM

PRIMARY INSTRUCTOR NAME, R# & % \_\_\_\_\_

**OFFICE USE ONLY:**

**APPROVAL:**

Scheduling Office: \_\_\_\_\_

Date: \_\_\_\_\_

Admissions & Records: \_\_\_\_\_

Date: \_\_\_\_\_

Scheduling Office: \_\_\_\_\_

Date: \_\_\_\_\_