
(Sem/Yr)

NON-STANDARD MEETING TIME REQUEST

Department of Registration and Records
1000 Harris Hall

Please complete this form if you are requesting to offer a course at a time that deviates from the approved **Campus Time Schedule**.

Please complete the following fields:

Course Prefix	Course Number	Section Number	Requested Begin Time/End Time/ Days of Week	Anticipated Enrollment	Number of Contact Mins. Per Week

Reason (ie: faculty, student, facility needs) _____

How are students impacted?

Yes No

- Is course required for degree?
- Are you requesting a 110 classroom?

(Departmental Signature)

(Date)

(Printed Name and Title)

Dept. Prefix

(URRC Chair Signature)