



Course and Curriculum Section Addition Request

Please fill in all of the below information:

Effective Term: _____ School/College: _____

Subject/Course#: _____ Section: _____ # of Credits: _____
e.g.(ACC 101) e.g.(A, B, etc.) e.g.(1-3 OR 3-0)

Component Type: _____ Enrollment Limit: _____

Days: _____ Time: _____ Bldg*: _____ Room*: _____
(M W F; TR) e.g.(8:00am – 8:50am) e.g.(LC, MM, etc.)

Alternate Title: _____

The Alternate Title will only appear on the student transcript if indicated. (31 Character Limit)

Print Alternate Title on Transcript: Yes No

Class Notes: *Please email Special Class Notes in a Word Document to: scheduling.rg@miami.edu*

Instructor UM-ID #: _____ Instructor Name: _____

Instructor Role: _____ Instructor Access: _____ Special Dates: _____

Attributes: _____
(Write, Civic, INTR1, INTR2, INTR3, etc.)

Classes Nbr. to be Combined: _____

Please enter only the class number that needs to be combined to the above added class section.

Dept. Contact: _____ Email: _____ Extn: _____

Department Chairman Signature: _____ Date: _____

Academic Dean/Director Signature: _____ Date: _____

*All General Purpose Classrooms will be assigned based on space available, course size, and date requested. Please submit a room request if you are in need of a General Purpose Classroom



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e.g.(ACC 101) e.g.(A, B, etc.)

Additional Instructors (maximum of 10 per section):

ID #: _____	name: _____	ID #: _____	name: _____
ID #: _____	name: _____	ID #: _____	name: _____
ID #: _____	name: _____	ID #: _____	name: _____
ID #: _____	name: _____	ID #: _____	name: _____

Section Requirements:

Major/Minor: __Y __N	Major (1): _____	Major (2): _____	Major (3): _____
	Minor (1): _____	Minor (2): _____	Minor (3): _____
School Code: _____			
Academic Level Code: _____			
Minimum GPA: _____			
Permission Required: _____			
Pre-Requisite Course (1): _____			
Pre-Requisite Course (2): _____			
Co-Requisite Course (3): _____			
Co-Requisite Course (4): _____			