



TO: Dr. Victor M. Vega
Provost & Vice President for Academic Affairs

FROM: _____
Chairperson

DATE: _____

SUBJECT: Supplemental Request to Offer Department-Course-Section

Provost Use Only	
____ Approved	____ Denied
_____ Signature	
_____ Date	

Term: _____ Year: _____

Course Reference Number: _____ Subject: _____ Course Number: _____ Section: _____

Course Title: _____

Credit Hours: _____ Variable Credit: _____ Hybrid _____ Online _____

If course is Special Topics & Problems or not in the current catalog, please attach a Course Outline/Syllabus.

Justification for adding this course: _____

Enrollment Limit: _____ Grading Mode: _____ Day(s) (MTWRF): _____

Start Time: _____ End Time: _____ Building: _____ Room: _____

Instructor's Name: _____ GSC ID #: _____

Starting Date (Month, Day, Year): _____ Ending Date (Month, Day, Year): _____

If "arranged" for 3 or less students, please list the student(s): Name: _____ GSC ID#: _____

Name: _____ GSC ID#: _____ Name: _____ GSC ID#: _____

Off-Campus Course

If this is an Off-Campus Course please mark all that apply below:

Early Entrance (EEP)
Web Mix-High School &
Campus (MIXW)

Dual Credit (DC1)
PAR (SCB1)

Taught at a Public High School (TC5)
Not taught at a Public High School (TC2)