



Office of the Registrar Course Schedule Update Form

Please Scan and Email

Monica at:

odonnell@njit.edu

w/cc:

noll@adm.njit.edu

Course ID, Section & CRN: _____ Term: _____

Requestor Name: _____ Date: _____

Course Cancellation: _____ **Chair Approval** _____

-----OR-----

Course Addition: _____ **Dean's Approval** _____

Chair Approval _____

Course Change: _____ **Dean's Approval** _____

Chair Approval _____

Current Course Information

Meeting Days	Start/End Time	Building/ Room	CAP

New/Changed Course Information

Meeting Days	Start/End Time	Building/ Room	CAP

Notes for Web Schedule: _____

Registration Restrictions: (if any apply)

Reasons for Change: _____
