

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

Class Schedule Exception Request Form A/B-X

1) Use this form when requesting off-grid meeting patterns, non-standard session lengths, or courses to be cross-taught. Standard meeting patterns, session lengths and course categories are defined in the University's class schedule policy, **1C1**.

2) To ensure timely processing of your request, please collect all necessary signatures and approvals and submit directly to the Provost's Office at Campus Box 1021, Fax# 650-3633, RH 3102.

3) For assistance or questions, please contact Academic Scheduling at 650-5593 or email at academicscheduling@siue.edu.

Year: _____

Requesting Department: _____

Department Contact: _____

Telephone Extension: _____

SIUE Email Address: _____ @siue.edu

Campus Box: _____

Exception (mark all that apply): Rationale for Exception(s) - for Cross-Taught requests, please include period of time requested (up to 3 years) and long-term plan for addressing underlying enrollment/resource issue:

- Session Dates
- Meeting Pattern
- Time Grid
- Cross-Taught (3-Year Max)
- Other

Section Info:				Meeting Times		Meeting Days						Session Dates		Location & Delivery					Capacity			
CRN	Subject	Course Number	Section Number	Start Time	End Time	M	T	W	R	F	S	U	Start Date	End Date	Building	Room	On/Off Campus	Schedule Type	Delivery Method	Enroll Max	Wait List Seats	

Instructor 1 (ID & Name): _____ % Assigned: _____ Additional Comments/Special Handling: _____

Instructor 2 (ID & Name): _____ % Assigned: _____

Instructor 3 (ID & Name): _____ % Assigned: _____

Instructor 4 (ID & Name): _____ % Assigned: _____

Approvals and Signatures

Department Chair: _____ Date: _____

Dean/Director: _____ Date: _____

Graduate Dean (Cross-Taught Only): _____ Cross-Taught Approved Through: _____ Date: _____

Approved Denied

Provost: _____ Approved One-Time _____ Approved On-going _____ Cross-Taught Approved Through: _____ Date: _____

Denied Cross-Taught Approved