

Term:	
	SP, SU, or FALL and YEAR
Requesting Department:	
Department Contact:	
Telephone Extension:	
SIUE Email Address:	
Campus Box:	



SCHEDULE CHANGE REQUEST (Form A/B)

- 1) The Schedule Change Request form should be used to request any changes that occur after the initial class schedule solicit has been returned to Academic Scheduling for the term.
- 2) To ensure timely processing of this request, please collect all necessary signatures and approvals prior to submission to Academic Scheduling.
- 3) The completed, signed form may be returned to Academic Scheduling via Campus Box 1047, Fax Extension 3332, or as a scanned email attachment.
- 4) Assistance, questions, & correspondence may be directed to Academic Scheduling at Extension 3087 or 5593, or by email: academicscheduling@siue.edu

Choose one option per CRN:			Section Information:			Military Times:		Days:							Session Dates:		Location:				Instructor Info:		Enrollment Info:		Add'l Details:	
A	C	C	CRN	Subject & Course	Section	Start Time	End Time	M	T	W	R	F	S	U	Begin Date	End Date	Campus? (On/Off)	Instr Method	BLDG	Room	Instructor Name and ID Number	Enroll Max	Waitlist Seats	Course Fee To Be Charged?*(Yes/No)	Freshman Seminar? (Yes/No)	
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Additional Steps For Cancelling a Class Section:

- 1) Contact Academic Scheduling immediately at Extension 3087 or 5593 to request the section status be changed to **Pending Cancellation**.
This measure prevents additional registration activity during the cancellation process.
- 2) Ensure that this form is routed to the Associate Vice Chancellor for Enrollment Management prior to submission to Academic Scheduling.
- 3) If cancellation is approved, the academic department initiating the cancellation is responsible for contacting all registered students to notify them of the status change, copying Academic Scheduling on the communication at: academicscheduling@siue.edu

* A course-specific fee will only be applied to a course section when prior, separate approval exists. Contact the Office of the Provost at Extension 3627 with questions related to course-specific fees.

Approvals and Signatures:

Department Chair:	Date:
College/School Dean:	Date:
Asc. VC for Enrollment Mgmt.: (Cancellations only)	Date:
Dir. of General Education: (Freshman Seminars only)	Date:
Academic Scheduling:	Date:

Additional Comments/Special Handling, including details of face-to-face meetings for blended classes (e.g. individual days/dates, times, and locations):