

Course Section New/Cancel/Modify Request

Enrollment Services

Phone 626.396.2313
Fax 626.396.2209
enrollmentservices@artcenter.edu

Use this form to create a new section or cancel/modify an existing section

New Cancel Modify

Section Information (Please Print)

Department _____ Course # _____ Section # _____ Term _____

Course Section Title _____

of Credits _____ Location: Hillside South Campus

Faculty Information

Faculty (Full Name) _____ Employee ID # _____ Add Remove

Percent _____ Load _____

Position Full-time Adjunct Faculty Position Code _____

Responsible Department(s) _____ Percent _____

_____ Percent _____

_____ Percent _____

Faculty (Full Name) _____ Employee ID # _____ Add Remove

Percent _____ Load _____

Position Full-time Adjunct Faculty Position Code _____

Responsible Department(s) _____ Percent _____

_____ Percent _____

_____ Percent _____

Section Offering Information

Instructional Method _____ Building _____ Room _____

Start Date _____ End Date _____

Start Time _____ End Time _____ Days of Week _____

Section Co-requisite Information

Co-requisite Course _____ Required

Co-requisite Section _____ Required

Section Restrictions

Maximum Capacity _____ Waitlist Yes No

Minimum Enrollment _____

Restrictions _____

Petition Required _____

Cross-List Information

Cross-List Section _____

Dept. _____ Course # _____ Section # _____

Cross-List Section _____

Dept. _____ Course # _____ Section # _____

Requestor Information

Staff Name (Print Full Name) _____

Date _____

ArtCenter College of Design

1700 Lida Street, Pasadena, California 91103

For Office Use Only

Date Request Received _____ Date Processed _____

Date Department Notified _____