

Tutorial: CLAS 450: CLAS 451: ITAL 490: LING 490 SPAN 490 SPAN 491

The departmental request form must be approved by the Supervisor (a full-time faculty member of the Department of Classics, Modern Languages & Linguistics), the Department Chair and the Advisor in order for the student to be registered.

STUDENT INFORMATION:

Name:	ID:
Tel.:	Email:
Program :	Semester (e.g. Fall 2011):

Course INFORMATION:

Number of Credits:	Title:
Description: <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	

Student's Signature _____

Date Submitted _____

Supervisor's Signature _____

Supervisor's Name _____

Chair's Signature _____

Chair's Name _____

Advisor's Signature _____

Advisor's Name _____

Progr. Assistant's Signature _____

Progr. Assistant's Name _____

FOR DEPARTMENT USE ONLY

Assign course # _____	Contact Scheduling _____	Add override _____	Contact Student _____	Registered _____	Assign on FCMS _____
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