

UAS Ketchikan Campus Course Offering Form



Course Name _____

Course Number _____ Credits _____

Fall Spring Summer

<input type="checkbox"/> Original <input type="checkbox"/> Amendment <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>	<input type="checkbox"/> Local <input type="checkbox"/> Web-Based (no meeting time) <input type="checkbox"/> Web-Based (Elluminate) <input type="checkbox"/> Audio-Conference
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Grading Letter Pass/Fail

Room Request / Max # Students _____

(Explain reason for request) _____

Course Dates _____ OR Full Semester Course

Preferred Days _____ Preferred Times _____

Instructor Name: _____

Address _____ Phone _____

Resume/Application on file New Adjunct

New instructors must complete hire packet.

Instructor Paid By: Payroll Contract Volunteer

Course Fees: (Tuition & required fees will be added automatically)

Distance Fees

CISCO Lab (\$25/Credit) Standard Distance(\$40/\$75)

Science/Art (\$70) Mailing Fee _____

Non Credit Course Fee _____ Course Pack _____

Other _____

Technology Requirements Detailed (Check all that apply)

fax tv/vcr tv/dvd computer w/ internet

headphones/mic other _____

Will you be using: *(items generated by UASK)*

Course pack VCR/DVD's Mailing equipment (i.e. cameras)

Mailings (homework/tests/course packs) Other _____

Additional Comments/Course Description: _____ Use Catalog Description

Administrative Use Only

Course Canceled		
<input type="checkbox"/>	Reason _____	Date _____ By _____
Course Number	CRN	Tuition
Room	Class Limit	Org
Approval	Date	Fees

