

INDIANA UNIVERSITY - OFFICE OF THE REGISTRAR - SCHEDULE ADD FORM

* = required field

= updatable field

*Course ID: Course Offering Nbr: _____

*Academic Institution:

*Term:

*Subject Area:

*Catalog Nbr: Course Title:
 (Maximum 30 characters)

*Session: Class Nbr: _____

Class Section: _____ *Start/End Date: -

*Component:

*Class Type: Associated Class: _____

*Location: Schedule Print: Y/N

Course Administrator: Student Specific Permissions: Y/N

*Academic Organization: Generate Cls Mtg Attend:

*Instruction Mode: Primary Instr Section:

Course Topic ID: Override Equivalent Course: Y/N

Class Equiv Crs Group:

Course Attribute

Course Attribute Value

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

<u>Facility ID</u>	<u>Cap</u>	<u>Pat</u>	<u>Mtg Start</u>	<u>Mtg End</u>	<u>M</u>	<u>T</u>	<u>W</u>	<u>T</u>	<u>F</u>	<u>S</u>	<u>S</u>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Topic ID: Print Topic on Transcript: Y/N

Free Format Topic: (30 char limit)

<u>Instructor ID</u>	<u>Name</u>	<u>*Instructor Role</u>	<u>Print</u>	<u>*Access</u>	<u>Contact</u>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> Y/N	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> Y/N	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> Y/N	<input type="text"/>	<input type="text"/>

<u>Room Characteristic</u>	<u>Quantity</u>	<u>Room Characteristic</u>	<u>Quantity</u>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Approval: _____

Date: / /

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*Class Status: [] *Consent: []

1st Auto Enroll Section: [] Requested Room Capacity: [] Total

2nd Auto Enroll Section: [] *Enrollment Capacity: []

Resection to Section: [] Wait List Capacity: []

Auto Enroll from Wait List: [Y/N] Minimum Enrollment Nbr: []

Reserve Capacity Sequence: []

Start Date: [] Requirement Group: [] Cap Enrl: []

Start Date: [] Requirement Group: [] Cap Enrl: []

Reserve Capacity Sequence: []

Start Date: [] Requirement Group: [] Cap Enrl: []

Start Date: [] Requirement Group: [] Cap Enrl: []

Seq# Print Loc Note # Free Format Text

[] [] [] []

[] [] [] []

[] [] [] []

Minimum Units: [] Maximum Units: [] Course Contact Hours: []

Use Blind Grading: [Y/N] Instructor Edit: []

*Graded Basis: [] Graded Component: []

Requirement Designation: [] Primary Component: []

Course Component Contact Optional *Final Exam

[] [] [Y/N] []

[] [] [Y/N] []

Class Requirement Group: [] Also Use Catalog Requisite: [Y/N]

Combined Sections ID: [] Combination Type: [] Permanent Combination: [Y/N]

Description: []

Requested Room Cpcty: [] Enrollment Capacity: []

*Class Number(s): [] [] [] [] []