

The University of Oklahoma

Norman Campus Office of the Senior Vice President and Provost

Approval Process for Schedule Change of a Scheduled Course

The Department/School of	requests permission to reschedule

Section Course Title

Course Reference

Number

Prefix

Number

Vice Provost for Instruction and Student Success	Assigned Instructor:				
Which other course? Assigned instructor requests a schedule change for their convenience. Reason for request? Other reason: Current scheduled meeting time: Proposed new meeting time: Contact person: Email address Phone number Please attach the class roster as of the date of the request. How will the students currently enrolled in this course be notified of the schedule change? Who is responsible to notify them in a timely way? [NOTE: Do not notify the students of any changes until this request is approved.] How will the students currently enrolled in this course be accommodated for an alternate enrollment possibil if the newly-scheduled time creates a conflict for them? APPROVED: Chair/Director of Department/School Date Mark Morvant Vice Provost for Instruction and Student Success Dean Date Kellie Dyer Date	Explanation:				
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	Dean	Date			Date

Semester