

**CHEYNEY UNIVERSITY OF PENNSYLVANIA
DEPARTMENT CLASS SCHEDULE FORM**

- Original submission
- Revision (Attach Original)

SEMESTER _____ YEAR _____

DATE PREPARED _____

3 - Part Form Distribution:
Original = Registrar's Office
Copies = Department Chairperson,
Dean

ACADEMIC DEPARTMENT _____ DEPARTMENT CHAIR _____

| INSTRUCTOR | COURSE TITLE | COURSE # | SEC | CAP | CR | LEC LEC+LAB | DAYS | TIME | CAMPUS CHEY/PU | BLDG/ROOM |
|-------------------------|--------------|----------|-----|-----|-----|----------------|------|------------|-------------------|-----------|
| (EXAMPLE) JOHN SMITH | PRIN OF | BCAI I | 01 | 25 | 3.0 | LEC | MWF | 9:30-10:20 | CHEY | LOGAN-219 |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

PAGE _____ OF _____

CHAIR _____ DEAN _____ REGISTRAR _____
Signature | Date Signature | Date Signature | Date