

Course Request Form

TU ID#: _____

Term: _____

Social Security #: - -

Name: _____

Permanent Address (street name & number) _____

Home Telephone # _____

City and State _____

Postal Code _____

E-mail address _____

Class #	Subject Area	Catalog #	Section #	Unit Hours	Days	Times	Class Permission Number (if Applicable)
5436	(example) HIST	145	101	3	M W F	8:00-9:15	123456
	1)						
	2)						
	3)						
	4)						
	5)						
	6)						
	7)						