KANSAS STATE

Office of the Registrar

enrollmentservices@ksu.edu Academic & Classroom Scheduling Office of the Registrar 118 Anderson Hall Manhattan, KS 66506

Please submit request when ALL fields are completed.

The form can be e-mailed as an attachment to enrollmentserv	ices@ksu.e	du
---	------------	----

Term:	Year:		-			
Department Scheduler:		Email: _	@ksu.edu	Contact #:		
Instructor Name:		Email:	@ksu.edu	Contact #:		
Subject (i.e. ENGL):	Catalog # (i.e. 100):		Class # (i.e. 12345):	Section:		
Session:	Component (i.e. LEC	/LAB):				
Select one: Requesting same time/days/dates/room as previous year Requesting different time/days/dates/room as previous year (may lose previous room) Adding a new class section (room may not be available)						
Preferred Characteristic (select o	ne):					
Basic Technology Class	room					
Common Technology C	lassroom					

Expanded Technology Classroom

Studio classrooms will be scheduled by the appropriate department and the meeting pattern information updated in KSIS by the Dean's Office. The department and Dean's Office are responsible to make sure there are **no conflicts or double scheduling in these rooms**. These courses DO NOT need a request form.