Florida Agricultural and Mechanical University

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CURRICULUM AUTOGEN

TERM: ☐ Fall ☐ Spring Summer ☐ A ☐ B ☐ C **YEAR:** _____

COURSE ID: PREFIX ☐☐☐ CATALOG# ☐☐☐☐ SECTION# ☐☐☐

COURSE TITLE: _____

ENROLLMENT SIZE _____ **MIN.** **MAX.** _____

PERMISSION REQUIRED _____ **ENTER 'Y' IF YES/'N' IF NO**

FIRST MEETING TIME _____ **AM/PM** - _____ **AM/PM**

FIRST MEETING DAYS ☐ M ☐ T ☐ W ☐ R ☐ F ☐ S

FIRST MEETING BLDG _____ **ROOM** _____

SECOND MEETING TIME _____ **AM/PM** - _____ **AM/PM**

SECOND MEETING TIME ☐ M ☐ T ☐ W ☐ R ☐ F ☐ S

SECOND MEETING BLDG _____ **ROOM** _____

DISTANCE LEARNING COURSE _____ **ENTER 'Y' IF YES/'N' IF NO**

INSTRUCTOR INFORMATION ***(PLEASE TYPE OR PRINT ONLY)***

	INSTRUCTOR NAME	FAMU ID#	FUND CODE
01	_____	_____	☐ Carry Forward ☐ E&G ☐ Tuition Diff/Carry Forward
02	_____	_____	☐ Tuition Differential

DEPARTMENT CHAIR: _____ **DATE:** _____

DEAN APPROVAL: _____ **DATE:** _____