

**ARTS GROUP
REQUEST FOR UNDERGRADUATE VARIABLE UNIT
COURSE (194H, 197T, 198, 199)**

Student: Complete and submit form to instructor for approval.

Student: _____ Major: _____

ID: _____ E-Mail: _____ Phone: _____

Course Identification:

				20____
Department	Number	Section	Units	Quarter Offered

Estimated average student/faculty contact (hours per week) _____

Estimated enrollment in group study course _____

Topic:

Course Plan – Explain precisely the work to be undertaken, i.e. subject matter, format of instruction, texts or reading

Grading: Explain criteria or awarding a passing grade

Total number of units completed to date: _____

Other special study courses this quarter: Department _____ Units _____

Instructor's Signature

Instructor's Name

Date

Department Chairperson's Signature

Department Chairperson's Name

Date