School Of Education
Course Request Form

Course Information

Department:  ☐ EMTP  ☐ ETSL  ☐ EFND  ☐ EDIP  ☐ ETSP  ☐ ________
Course Title: ____________________________________________________________________________

Number of Hours: _____  Student Limit: _____  Semester: ______

Grade Mode:  ☐ Standard  ☐ Pass/Fail  Fees: $_________  Tuition:  ☐ $560  ☐ $ ________

Schedule Type:  ☐ Lecture  ☐ Distance  ☐ Hybrid

Dates: ___________________________________________________________________________________

Times: ___________________________________________________________________________________

Professor of Record: ______________________ Adjunct: ___________________________

Reason for Course Request: ____________________________________________________
____________________________________________________________________________
_________________________________________________________________________________________

*Any new course offered needs to have the syllabus turned into Dean Arroyo as soon as possible and book adoptions need to be sent to Charity Mack at cmack@regent.edu.*

Signature of Faculty: ______________________________________ Date of Request: _____________

Signature of Dean: ________________________________________ Date Approved: _____________

~Please sign and return to Hannah Miltenberg in ADM 207~any questions please call 266-4314