

NEW COURSE WORKSHEET

COURSE SCHEDULE WORKSHEET FOR: SUMMER FALL SPRING INTERSESSION 20_____

ACADEMIC DEPARTMENT: _____

AS/ EN	COURSE NUMBER	FULL COURSE TITLE	AREA	CREDITS	HOURS		REGISTRATION RESTRICTIONS
					CLASS	LAB	
_____	_____	_____	_____	_____	_____	_____	_____
		_____					_____
		_____					_____

PLEASE SUGGEST AN ABBREVIATED TITLE (MAXIMUM - 35 CHARACTERS): _____

***Please submit new course descriptions via e-mail to asenscheduling@jhu.edu.**

WRITING INTENSIVE YES NO SATISFACTORY/ UNSATISFACTORY (UGrad only) YES NO

SEC.	CR.	LIMIT	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	INSTRUCTOR(S) <small>(Last Name, First Name, Date of Birth) (Please indicate if Grad. Student or TA.)</small>
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
			_____	_____	_____	_____	_____	_____	_____

Prerequisite/Corequisite Hard Constraints: ON OFF

Prereqs/Coreqs (Please use course numbers and indicate Prereqs. or Coreqs.):