**PRELIMINARY SCHEDULING FORM**

New Course or Amendment of Current Courses

**Department:** …………………………………………………………….…………….……………… **Semester:** ………………………………………………….…………………

**Part-I Course Information**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Course** | | **Credit Hours** | **Contact Hours** | | | **Pre-Requisite** | **Main Activity** | **Course Director** |
| **Code** | **Course Title** | **LT** | **LB** | **Total** |
|  |  |  |  |  |  |  |  |  |

**Part-II Options of Preferred Hours Distribution**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **(Theoretical) LT** | | | | | **(Practical) LB** | | | | |
| **1** | **2** | **3** | **4** | **5** | **1** | **2** | **3** | **4** | **5** |
|  |  |  |  |  |  |  |  |  |  |

**Part-III Course Assessment**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Course** | | **Class Assessment Before Mid-Term** | | | | | | | | | | **Major I** | **Mid-Term** | | **Class Assessment After Mid-Term** | | | | | | | | | | **Major II** | **Final Exam** | |
| Code | Title | 1 | | 2 | | 3 | | 4 | | 5 | | LT | LB | 1 | | 2 | | 3 | | 4 | | 5 | | LT | LB |
| Q | A | Q | A | Q | A | Q | A | Q | A | Q | A | Q | A | Q | A | Q | A | Q | A |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Part-IV Staff & Classrooms/ Labs**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Theoretical (LT)** | | | | **Practical (LB)** | | | |
| **I.D. No** | **Staff Name** | **Priority** | **Classroom #** | **I.D. No** | **Staff Name** | **Priority** | **Lab #** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Legend ; **A** : Assignment **Q** : Quiz

**Chairman/ ELC Director:** **Accomplishment**

The amendment has been successfully completed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ The amendment has not been done due to the following reasons:

Sign Date …………………………………………………………………………………..…….…………….……………

…………………………………………………………………………………..…….…………….……………

**SIS Coordinator:**

\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Name Signature Date