**PRELIMINARY SCHEDULING FORM**

Status Change of Instructional Commitment for the Current Faculty Members

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. No** | **I.D No.** | **Staff Name** | **Courses to Be Added** | **Courses to Be Deleted** |
| **Course 1** | **Course 2** | **Course 1** | **Course 2** |
| **Code** | **Title** | **A** | **B** | **Code** | **Title** | **A** | **B** | **Code** | **Title** | **A** | **Code** | **Title** | **A** |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Legend:  **A:** Activity (Choose **P** or **T**) **P:** Priority

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

 The amendment has been successfully completed.

……………………….………..……….. ……………………..…..……… The amendment has not been done due to the following reasons:

 Signature Date

 **SIS Coordinator:**

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

 Name Signature Date