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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Quarter & Year | Summer  Fall  Winter  Spring | | | | Year:  Enter Year Here | | | Type: | | Add Cancel  Change | | |
| Location: | Lummi  Muckleshoot  Nez Perce  Nisqually  Port Gamble  Swinomish  Tulalip  Work Force Other: | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Course Information | | | | *Adding a class, fill out all information EXCEPT for Section code.*  *Canceling a course, fill out first line of Course Information.*  *Changing a course, fill out first line & ONLY the class information that is being changed.* | | | | | | | | |
| Course Department (ENGL,MATH,CMPS)  Click here to enter text. | | | Course #  (CEU courses end with a U)  Click here to enter text. | | | | Credit Amount  1 clock hr = .1 cr  Click here to enter text. | | | | Section Code  *Leave blank if adding a class* | |
| Course Title – Cannot exceed 30 characters including spaces  Click here to enter text. | | | | | | | | | | | | |
| Time (Begin-End)  Click here to enter text. | | | Days – Check all that apply  M T W R F  S  U | | | | Seat Limit  Click here to enter text. | | | | Location/Building/Room  Click here to enter text. | |
| Start Date  Click here to enter a date. | | | End Date  Click here to enter a date. | | | | Instructor ID  Click here to enter text. | | | | Instructor Name  Click here to enter text. | |
| Exclude from Tuition | | | Yes  No | | | | Course/Materials Fee | | | | $ | |
|  | | | | | | | | | | | | |
| Special instructions  Click here to enter text. | | | | | | Submit to CEU Coordinator   * Implementation form * Course Syllabus and outcomes * CEU Enrollment form * Copy of student’s Tribal ID or CDIB * Flyer/Agenda * Evaluation/Assessment   CEU Coordinator submit to Enrollment   * Completed & signed Implementation form * Completed & signed CEU enrollment forms * Copy of student’s Tribal ID or CDIB   **Must have all documents submitted to be entered.**  **Must be submitted within 5 days, as per CEU Procedure.** | | | | | | |
| Approvals/Signatures Electronic Signatures will NOT be accepted, please print & sign | | | | | | | | | | | | |
| CEU Coordinator: | |  | | | | | | | Date: | | |  |
| Dean Authorization: | |  | | | | | | | Date: | | |  |