Section 1 Course Information

Credit Course Number

Section Number (Off-Campus)
Section Number (On-Campus)

Attach justification for on-campus courses.

Course Title: ______________________________________________________________________

Expense Fund (Complete UDDS # Field)

<table>
<thead>
<tr>
<th>Revenue Fund</th>
<th>Instructor Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>101-B-__-____</td>
<td>131 1</td>
</tr>
<tr>
<td>189-B-____</td>
<td>189 2-5 or A-D</td>
</tr>
<tr>
<td>128-B-__-____</td>
<td>128 6</td>
</tr>
</tbody>
</table>

Number of Credits:

Type of Program- Check One
☐ 1 Lower Division Undergraduate Credit
☐ 2 Upper Division Undergraduate Credit
☐ 3 Lower & Upper Division Undergraduate Credit
☐ 4 Graduate Credit
☐ 5 Both Graduate & Undergraduate Credit

Category: Check One
☐ IA - Part of Interinstitutional Agreement between UWM and another campus
☐ RP/F – Regular Program/Fieldwork
☐ SS – Courses aimed primarily at Special Students
☐ HS – Courses offered to High School Students.

Instructional Hours: _____

Tuition: ______
☐ Graduate _____ ☐ Undergraduate _____

City/County: Milwaukee/Milwaukee

Building/Room No.: ______

Address: ______

Starting Date: _____ Ending Date: _____

Meeting Hours: _____ to _____

Number of Meeting Days:

Days of the Week: ______

Estimated Enrollment: ______

Program Coordinator: ______

TelephoneNumber: ______

Section 2 Signatures

Dept
Chairperson ____________________________ Date

Dean ____________________________ Date

Dean Graduate School ____________________________ Date

Dean, Cont. Ed. ____________________________ Date

Section 3 Instructor Information

Part of Load or Study Abroad: Complete “Name and Appointment” Only

Overload, Purchased Load, Ad Hoc, or Outreach: Complete entire section

<table>
<thead>
<tr>
<th>Instructor Appointment</th>
<th>Off Campus</th>
<th>On-Campus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part of Load</td>
<td>(101 Fund)</td>
<td>1</td>
</tr>
<tr>
<td>Overload</td>
<td>(189 Fund)</td>
<td>2 A</td>
</tr>
<tr>
<td>Purchased Load</td>
<td>(189 Fund)</td>
<td>3 B</td>
</tr>
<tr>
<td>Ad Hoc</td>
<td>(189 Fund)</td>
<td>4 C</td>
</tr>
<tr>
<td>UWM Faculty Outreach</td>
<td>(189 Fund)</td>
<td>5 D</td>
</tr>
<tr>
<td>Study Abroad</td>
<td>(128 Fund)</td>
<td>6 --</td>
</tr>
</tbody>
</table>

Name: ______
Appointment: ____ Total Fees $ ______

Contingent upon sufficient enrollment

Name: ______
Appointment: ____ Total Fees $ ______

Contingent upon sufficient enrollment

Name: ______
Appointment: ____ Total Fees $ ______

Contingent upon sufficient enrollment

Name: ______
Appointment: ____ Total Fees $ ______

Contingent upon sufficient enrollment