## **Spring Semester 2020 Course Request Form**

## Submit requests for Spring Semester courses by Nov. 15.

Submit Form to Joshua Floyd, Dual Enrollment Coordinator Bland Hall, Room 102A

Office Phone: 276-223-4110 Fax Number: 276-223-4861

School			Semester	Year	_	
Date Spring	g Semester Begin	ns:	Ending Date:			
WCC Course Name And Number	Anticipated Number of Sections	Anticipated Time of Class (Block or Period)	Anticipated Total Number of Students	Instructor's Name (If employed by public school)	New or Returning Instructor	
Ex. ENG 111	2	4 <sup>th</sup> block	60	Bradberry	Returning	
*** When each class.		ile is completed,	please fax establ	ished meeting tin	nes for	
Person com	pleting this form	Name		Position	_	
		Name		Position		

Phone Number

Email