

REQUEST FOR CONTINUATION OF SMALL CLASS

Dept. _____ Course Abbv. _____ Number _____ Section _____

Course Title _____

Instructor _____ Enrollment _____ Semester _____

CB Justification Code(s) _____ Justification for Continuing _____

Requested By: _____

Department Chair

Date

Recommended By: _____

Academic Dean

Date

Approved By: _____

Vice President for Academic Affairs

Date

INSTRUCTIONS: This form is to be completed no later than after the second class meeting and after it has been ascertained that sections have not met minimum standards.

CB SMALL CLASS JUSTIFICATION CODES

- 01 Required course for graduation. The course is not offered each semester (or term) and, if cancelled, may affect the date of graduation of those enrolled.
- 02 Required course for majors in this field and should be completed this semester (or term) to keep proper sequence in courses.
- 03 Course in newly established degree program, concentration, or support area.
- 04 Interdepartmental (cross-listed) courses taught as a small class by the same faculty at the same station, provided that the combined courses do not constitute a small class
- 05 First time offering of the course.
- 06 Class size limited by accreditation or state licensing standards.
- 07 Class size limited by availability of laboratory or clinical facilities.
- 08 Voluntarily offered by a faculty member in excess of the institutional teaching load requirement and for which the faculty member received no additional compensation.