

VARIABLE TITLE COURSE DESIGNATION

PURDUE UNIVERSITY
OFFICE OF THE REGISTRAR
FORM VT (5/2020)

RETURN COMPLETED FORM TO classroomsched@purdue.edu

Registrar use only

1. PUID _____ 2. PRINTED NAME _____
LAST FIRST MIDDLE

3. TERM _____ 4. PART OF TERM _____ 5. COLLEGE _____ 6. PROGRAM OR MAJOR _____
(Ex. AG, HH) (Ex. SLH, PSY)

7. CLASSIFICATION _____

Course Title

Course Title will appear on student's official academic transcript and should provide a brief, general description of the subject matter covered.
Limit: 30 characters, including spaces.

1. _____
2. _____

If no title is given, a default title will be assigned.

	A - Add M - Modify	CRN	Subject (Required)	Course # (Required)	Credit (Required)	Grade Option*
1						
2						

*Default grade mode will be applied (A, B, C, etc.) unless noted otherwise

AUTHORIZATIONS:

SIGNATURE OF STUDENT (required) _____ Phone Number _____ DATE _____

STUDENT E-MAIL ADDRESS (required) _____

SIGNATURE OF INSTRUCTOR (required) _____ Phone Number _____ DATE _____

PRINTED/TYPED NAME OF INSTRUCTOR (required) _____

SIGNATURE OF STUDENT'S ADVISOR OR GRADUATE SCHOOL (required) _____ Phone Number _____ DATE _____

PRINTED/TYPED NAME OF STUDENT'S ADVISOR OR GRADUATE SCHOOL (required) _____

SIGNATURE OF DEPARTMENT HEAD (as needed) _____ Phone Number _____ DATE _____

PRINTED/TYPED NAME OF DEPARTMENT HEAD (as needed) _____