SAN JOSÉ STATE UNIVERSITY | SPECIAL SESSION

Class Section Add Petition

Submit this completed form to International and Extended Studies (IES). Extended Zip 0135 or Fax: (408) 924-2666.
Upon completion, the requester will be contacted by phone or fax with the schedule code and section number.

A Special Session Instruction Appointment form must be submitted to Faculty Affairs.

Year _____ Term: ☐ Winter ☐ Spring ☐ Summer ☐ Fall

Requestor Name: _____ Requestor Email: _____

Requestor Phone: _____ Requestor Fax: _____

Subject Area: _____ Catalog Number: _____

Class Title: _____ Units: _____

Special Program: _____ **or** Supervision or Advising Class: _____

Fee Per Unit: **$** _____ Administrative Fee Per Unit: **$** _____

Maximum Enrollment: _____ Class Start Date: _____ Class Start Date Number: _____

If not standard dates, you must enter exact class meeting dates and days If not standard dates, you must enter exact class meeting dates and days of class meetings if class meets every other week, list actual dates of class meetings.

Days of Week: ☐ U ☐ M ☐ T ☐ W ☐ R ☐ F ☐ S Meeting Start Time: _____ Meeting End Time: _____

(Enter exact start and end times for each meeting date)

Department Consent: ☐ Y ☐ N Instruction Mode: ☐ P ☐ WW ☐ M ☐ PW Print Class in Schedule: ☐ Y ☐ N

On Campus: ☐ Y ☐ N if Yes - Room Needed: ☐ Y ☐ N Off Campus: ☐ Y ☐ N if Yes - Location: _____

Instructor's Employee ID Number: _____

(Instructor MUST already have a valid Employee ID Number in HR in order to attach to a section)

Note any special salary agreements for this course:

_____

_____

_____

_____

Instructor's Name	Instructor's Signature	Date
Program Director's Name	Program Director's Signature	Date
College Dean or Designee's Name	College Dean or Designee's Signature	Date

FOR IES OFFICE USE ONLY

Associate Dean's Signature of Approval: _____ Class Number: _____ Section Number: _____

Processed By: _____ Date: _____

Units: _____ F: _____ D: _____ U: _____ Fee Type: _____ Term Code: _____