

SCHEDULE OF COURSES

SEMESTER: _____ **YEAR:** _____

DEPARTMENT/INSTITUTE: _____

1. **Course No.:** _____
Credit Hours: _____
Course Title: _____
Instructor: _____

2. **Course No.:** _____
Credit Hours: _____
Course Title: _____
Instructor: _____

3. **Course No.:** _____
Credit Hours: _____
Course Title: _____
Instructor: _____

4. **Course No.:** _____
Credit Hours: _____
Course Title: _____
Instructor: _____

5. **Course No.:** _____
Credit Hours: _____
Course Title: _____
Instructor: _____

6. **Course No.:** _____
Credit Hours: _____
Course Title: _____
Instructor: _____

7. **Course No.:** _____
Credit Hours: _____
Course Title: _____
Instructor: _____

8. **Course No.:** _____
Credit Hours: _____
Course Title: _____
Instructor: _____

Date: _____ **Chair/Director** _____