

TARLETON STATE UNIVERSITY
CONTINUING EDUCATION COURSE CREATION FORM

This form is completed after a Continuing Education Activity has been approved by the Provost and Executive Vice President for Academic Affairs.

Course Name (i.e. NURS)	Course Term (i.e. Spring 2014)	CRN (for Registrar use)
Course Title (i.e. Beginning Basket Weaving)		
Dates/Times that Class Meets		
Instructor Name	Course Fee \$	
Location of Class (i.e. campus/building/room)		
Course Description (for marketing purposes)		
Course Material Requirements or Recommendations		
Contact Person	Contact Phone	Contact Email
Printed Name of Person Completing Form		
Signature	Date	
Data Recorded in Academic Outreach and Engagement By	Date	
Data Input in Registrar's Office By	Date	

Return this form to Academic Outreach and Engagement at Box T-0010.