

## Adding/Modifying/Cancelling Academic Courses Form

Semester:

Academic Year:20 / 20

College:

Department:

Type of Operation: Addition Cancellation Modification

Appointment

Faculty Member

Condition

Courses and Section Number

Number of units

Maximum Limit

Course Name in Arabic

### Section Details After Requested Operation:

Days	Sunday	Tuesday	Thursday
Lecture Time			
Tutorial Time			
Lab Time			

Monday	Wednesday

Course Instructor:

Faculty ID:

From

To

Faculty Signature:

Building:

Room

Reason for Modification:

Head of Department Signature

Dean's Assistant for Student Affairs Signature