

UNM – LOS ALAMOS SEMESTER SCHEDULING FORM

SEMESTER _____ YEAR _____

Enrollment Capacity _____ Room **	Course Number (Specify T's)	Course Title	Credit Hours	Section Number	Instructor	Days (Dates for Short Courses)	Time	Lab Fees
CC _____ RM								
CC _____ RM								
CC _____ RM								
CC _____ RM								
CC _____ RM								
CC _____ RM								
CC _____ RM								
CC _____ RM								
CC _____ RM								
CC _____ RM								
CC _____ RM								
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CC _____ RM								

** Please list room requests for courses with special needs (e.g. computer/computer tech, art studio courses and)