



**COURSE TITLE REQUEST**

Date \_\_\_\_\_ HSU-ID # \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Last First Middle

If you are enrolled in independent study (399, 499, or 699) or a field problems course(s) (495), and want the specific title(s) of your study or project posted to your academic record, provide title(s), **not to exceed 30 characters**, on this form. Obtain the **instructor's signature** to verify the title, and return it to the Office of the Registrar, SBS 133. Titles will be posted at the end of the semester when a final grade is received.

To title courses, other than those listed above, signatures of the **instructor and department chair** are required.

**IMPORTANT: Course title not to exceed 30 characters.**

**#1**

Term Taken:	CRN:	Subject:	Course #:	Units:	Instructor Approval:	Dept. Approval:
<b>TITLE:</b> <input type="text"/>						

**#2**

Term Taken:	CRN:	Subject:	Course #:	Units:	Instructor Approval:	Dept. Approval:
<b>TITLE:</b> <input type="text"/>						

**#3**

Term Taken:	CRN:	Subject:	Course #:	Units:	Instructor Approval:	Dept. Approval:
<b>TITLE:</b> <input type="text"/>						