

Application for Off-Campus Workshop Flexibly Scheduled Course
 (All information must be completed by the instructor* conducting the course/workshop)

Semester Offered: F S X

Year Offered: 20__

Course Title _____

Department Name _____ Course Code _____

Field Site: YSU ___ or Name of Site _____ Catalog No. _____

Starting Date _____ Ending Date _____ Sem. Hrs. _____

Meeting Days and Hours _____ Wkld. Hrs. _____

Instructor(s) Name(s) _____ Phone # _____ Instr. SSN _____

Total Number of Scheduled Contact Hours _____ # of Students Expected _____

Amount of Outside Effort Expected from Student Through Assignment:
 _____ Little or none _____ Moderate _____ Significant

Identify prerequisites for the course (including department name and catalog number for prerequisite course(s) and other prerequisites, such as permission of the instructor, student rank, prior admission to a college or major, etc.):

Workshop Topic and Course Description: _____

If a contract has been signed by an Authorized Institutional Official for this course (i.e. held off campus and the cost of instruction will be paid by an external agency, grant, etc.), please indicate the fee the student is to be charged. If the course is funded by an external agency (i.e. grant, etc.), please provide the account number. If the course is being paid by an external agency, please indicate the procedure for payment (i.e. billing, purchase order, etc.).

Please indicate **exactly** which fees are being paid by the external agency:

Application Fee _____ Non-Resident Surcharge _____ Instructional Fee _____ General Fee _____

Multi-Service Fee _____ Academic Computing Fee _____ Additional Fees (please specify) _____

Refer to the Ohio Board of Regents Standards for Off-Campus Instruction Activity, Section C, RG 1-08; Ohio Board of Regents Operating Manual for Two-Year Campus Program, Academic Credit, Page 600.1. Students enrolled in a graduate course who have not previously been admitted to the YSU Graduate School may be registered as "Non-Degree Graduate Students." All students, however, will complete a "Workshop Application" form.

ATTACH COURSE SYLLABUS (Including, for example, reading assignments, writing assignments, examination date, self-paced or directed laboratory work, grading policy, etc.)

***For Graduate Courses Only: Students enrolled in workshops are graded on a S/U basis. Instructor must have current Graduate Faculty Status. If not, required paperwork must be completed before the course/workshop is offered.**

Signature of the chairperson and dean below attests to the accuracy of the information submitted above and that excess course costs not covered above will be the responsibility of the department and college. The college dean approves the workshop tuition rate.

Chairperson

Date

College Dean

Workshop Tuition Rate Approved _____yes _____no _____
Date

Graduate Courses Approved by:

Graduate Dean

Date

OBOR Course Number

Asst. Provost

Date