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## Winter Term 2019

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1. Course number & title: \_\_\_\_\_
2. Instructor(s): \_\_\_\_\_
3. Credits: \_\_\_\_\_
4. Justification for offering winter course: \_\_\_\_\_  
\_\_\_\_\_
5. No. of Students expected to register for this course: \_\_\_\_\_
6. Proposed schedule for winter course:
  - Course Start date: \_\_\_\_\_
  - Schedule: *Monday to Friday*, \_\_\_\_\_ *am/pm* to \_\_\_\_\_ *am/pm*
  - Course end date: \_\_\_\_\_
  - Total Contact Hours- 42(for 3 credit course): \_\_\_\_\_
  - Mid Exam date: \_\_\_\_\_
  - End Exam date: \_\_\_\_\_
  - Grades Submission date: \_\_\_\_\_

**Signature of Course Instructor** (with date)

**Name:**

**Signature of HoD**

**Deputy Registrar (A.P)**

**DEAN (A.P)**