

MTI COURSE SELECTION SHEET

(Use more than one sheet if needed.)

Center:

Session: _____ J-Term Semester: _____ Spring _____ Summer _____ Fall

COURSE

Course Number and Title:

Name of Instructor:

Instructor's Email Address:

Day and Time of Course Meeting:

Start and End Date:

Classroom Location:

Estimated Number of Students:

COURSE

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Name of Instructor:

Instructor's Email Address:

Day and Time of Course Meeting:

Start and End Date:

Classroom Location:

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