COURSE CONTENT RECORD
West Texas A&M University
Office of the Registrar

Student:_____ SSNo.(or WT ID #)_____

Course Taken:_____
Dept/number/section title credit hrs semester/year

Complete either or both sections below:

PURPOSE: To provide a description of course content for directed study courses.
To be completed by instructor.

Description of Study:_____

_____

_____

_____

_____

Is this course to be substituted for another course? No_____ Yes_____

If Yes, which course (course/number)?_____

Instructor (please print)_____ Signature/Date_____

FORM WILL BE RETAINED IN STUDENT'S ACADEMIC FILE FOR FUTURE REFERENCES TO DESCRIPTION OF STUDY.

PURPOSE: To provide a subtitle for notation on WTAMU transcript.
To be completed by department.

Subtitle: (**Limit 60 spaces per two lines; 30 spaces maximum for each line**)

Line One: _____

Line Two: _____

Dept. Head (please print) _____Signature/Date _____

Dean (please print)_____Signature/Date _____

NOTE: To have subtitle listed on the student's transcript, this form must be received in the Registrar's Office by **mid-term** of the semester the course is taken.

To be completed by Registrar's Office.

Received:_____ Subtitles entered: _____

Revised 4/03