California State University, Long Beach
Request for Exception to Noon Hour Scheduling Policy

Mail or fax (57170) to Helen Batchelor, AS-124.

Academic Senate Class Scheduling Policy 99-24 policy states: “Courses scheduled Monday, Wednesday, & Friday 12 noon - 12:50 pm, or Monday and Wednesday 12:30 pm - 1:45 pm must have multiple sections, some of which are scheduled in daytime hours. Exceptions to this restriction may only be made for compelling reasons and require the approval of the college dean and the Office of Academic Affairs.”

Please use this form to request an exception to the Noon Hour Class Scheduling. If an exception is approved, submit this form to Academic support. All denied exceptions should be rescheduled in compliance with class scheduling policy.

Subject: ______________________________________ Course #: ___________________ Section #: __________________ הרות
Meeting Days: __________________________ Start and End times: __________________________

Related lab/activity, if any (for information only): Section #: ___________ Day(s): ___________ Time: ____________

Other sections scheduled (if any):

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<th>Section #</th>
<th>Day(s)</th>
<th>Time</th>
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Reason class should be exempt ______________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Department Chair’s signature __________________________ Date ________________

Dean’s signature __________________________ Date ________________

Vice Provost’s Decision
☐ Approved (does not guarantee room availability)

☐ Approved - Contingent on: ____________________________________________
____________________________________________________________________
____________________________________________________________________

☐ Denied - Comment _______________________________________________
____________________________________________________________________
____________________________________________________________________

Vice Provost’s signature __________________________ Date ________________