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SPECIAL TOPICS FORM

All sections on this form must be complete before submission.

	DIVISION:	FALL	SPRING		SUMMER	
	DEPT ABBR:			SECTION ID:		
	ENTITY CODE:			COURSE TYPE:		
	COURSE #:			REG #:		
Special Topics Course Title:						
(must be 25 characters or less including spaces)						
Scheduler's Signature: Date:						
		Approved:	D	Disapproved:		
	Dean's Signature: Date:					
(Graduate or DUAS)						