



DSUlive™ Request Form

DSUlive™ courses can be requested by students who have extenuating circumstances that restrict traditional attendance. The Academic Records office will notify advisors to contact the faculty member(s) of the courses identified on this form upon approval by dean or director.

Student Name

Student ID

Semester

Course Prefix

Catalog Number

Course Number

Course Title

Course Prefix

Catalog Number

Course Number

Course Title

Course Prefix

Catalog Number

Course Number

Course Title

Course Prefix

Catalog Number

Course Number

Course Title

Course Prefix

Catalog Number

Course Number

Course Title

Reason for request (if additional space is needed, please attach your rationale to this form):

Dean or Director Signature: _____

Date: _____

Recommend: Approval

Denial