
Last Name _____ First Name _____ Student W# _____

Home Telephone # _____ Cell Phone # _____

EMERGENCY LOCATING SERVICE

Class schedule for _____ (semester & year) Date _____ Initials _____

Please indicate the name of the building, and the room number, where your classes are held.

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8 – 9 AM							
9 – 10 AM							
10 – 11 AM							
11 AM – Noon							
Noon – 1 PM							
1 – 2 PM							
2 – 3 PM							
3 – 4 PM							
4 – 5 PM							
5 – 6 PM							
6 – 7 PM							
7 – 8 PM							
8 – 9 PM							

Note:

1. You are responsible for keeping this schedule current. If you add or drop a class, be sure to notify the Student Development and Campus Life Office at 575-6700.
2. If an emergency call comes in, someone will be dispatched to your scheduled class to locate you.

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