Illinois Community College Board COURSE MASTER FILE CHANGES

(submitted via ICCIS)

COLLEGE NAME							5-DIGIT COLLEGE NO.							
Complete for ALL Courses:				Complete Only Items to be changed:										
Current Information					Information									
PCS	Course	Course No	Course Prefix	Course#		Title (limit to 50 characters)				PCS CIP	Curric	Curric #		
code	Prefix										Code	Prefix		
			# of Repeats	V	/ariable	Credit hours Lecture h		ire hours	Lab hours	Effective Date:				
					Y N									
PCS	Course	Course No	Course Prefix	Course#		Title (limit to 36 characters)				PCS CIP	Curric	Curric #		
code	Prefix					<u> </u>					Code	Prefix		
			# of Repeats	Variable		Cre	Credit hours Lecture hours Lab h		Lab hours	Effective Date:				
					Y N									
PCS	Course				Course#		Title (limit to 36 characters)				PCS CIP	Curric	Curric #	
code	Prefix									Code	Prefix			
			# of Repeats	Variable		Credit hours		Lecture hours		Lab hours	Effective Date:			
					Y N									
SIGNED BY				DATE	ATE ICCB USE ON			NIY	UPDATED) BY:	ON			
College Official Responsible				=··· -					3. 2					