Illinois Community College Board
COURSE MASTER FILE CHANGES
(submitted via ICCIS)

COLLEGE NAME					5-DIGIT COLLEGE NO.			
Complete for ALL Courses: *Current* Information			**Complete Only Items to be changed:** Information					
PCS code	Course Prefix	Course No	Course Prefix	Course#	Title (limit to 50 characters)	PCS CIP Code	Curric Prefix	Curric #
			# of Repeats	Variable Y N	Credit hours	Lecture hours	Lab hours	Effective Date:
PCS code	Course Prefix	Course No	Course Prefix	Course#	Title (limit to 36 characters)	PCS CIP Code	Curric Prefix	Curric #
			# of Repeats	Variable Y N	Credit hours	Lecture hours	Lab hours	Effective Date:
PCS code	Course Prefix	Course No	Course Prefix	Course#	Title (limit to 36 characters)	PCS CIP Code	Curric Prefix	Curric #
			# of Repeats	Variable Y N	Credit hours	Lecture hours	Lab hours	Effective Date:
SIGNED BY			DATE		ICCB USE ONLY	UPDATED BY:		ON
	College Official Responsible							