

**IDAHO STATE UNIVERSITY**  
**CHANGE OF COURSE TITLE**

To the Registrar:

Date: \_\_\_\_\_

Student Id: \_\_\_\_\_

Student's Name: \_\_\_\_\_

The title of the course below was recorded as: \_\_\_\_\_

Course: \_\_\_\_\_ Section: \_\_\_\_\_ in Semester \_\_\_\_\_

This title should be changed to \_\_\_\_\_

Approved By:

\_\_\_\_\_  
Instructor

\_\_\_\_\_  
Dept. Chairperson/Asst. Dean

White – Registrar

Yellow – Instructor

Pink – Dept. Chair

Gold - Student