



Syllabi Summary

Syllabus Summary for _____ semester, 20____

Complete a column for each syllabus.

COURSE NAME & NUMBER

COURSE NAME & NUMBER

COURSE NAME & NUMBER

CLASS LOCATION & TIME

CLASS LOCATION & TIME

CLASS LOCATION & TIME

INSTRUCTOR'S NAME & EMAIL

INSTRUCTOR'S NAME & EMAIL

INSTRUCTOR'S NAME & EMAIL

OFFICE HOURS & LOCATION

OFFICE HOURS & LOCATION

OFFICE HOURS & LOCATION

TEACHING ASSISTANT

TEACHING ASSISTANT

TEACHING ASSISTANT

ATTENDANCE/MAKE-UP POLICY

ATTENDANCE/MAKE-UP POLICY

ATTENDANCE/MAKE-UP POLICY

ASSIGNMENT DUE DATES

ASSIGNMENT DUE DATES

ASSIGNMENT DUE DATES

TEST & QUIZ DATES

TEST & QUIZ DATES

TEST & QUIZ DATES

FINAL EXAM DATE & TIME

FINAL EXAM DATE & TIME

FINAL EXAM DATE & TIME

OTHER

OTHER

OTHER