South Orange County Community College District

SADDLEBACK COLLEGE

Large Lecture Class Request

Semester _____ Date _____

Division Select a Division _____

Large Lecture designation is requested for the following classes:

Ticket #	***Class***	***Faculty***	***Location***	***# of students***

It is understood that all large lecture pay is included in the Division's OSH allocation.

Requested by: Dean's printed name: _____

Dean's signature: _____

☐ Approved ☐ Disapproved

Signature
Vice President of Instruction: _____

Distribution: Division
Office of Instruction