Northwestern
OKLAHOMA STATE UNIVERSITY

Request for ITV Class

Last name, first name _____ Date: _____

(To be completed by the person making the request)

Mailing address
(street, city, state, zip) _____

Phone number (area code first) **Required** _____ **Northwestern email: (required)** _____

Area of Study: _____

Northwestern student: (check one)

Yes	No

Name of site: _____

Course:	Discipline	Number	Name of Course	Semester Year	Spring	Summer (check one)	Fall
Course:	Discipline	Number	Name of Course	Semester Year	Spring	Summer (check one)	Fall
Course:	Discipline	Number	Name of Course	Semester Year	Spring	Summer (check one)	Fall

Name and distance (in miles) of the nearest Northwestern Oklahoma State University site (this includes Alva, Enid, Woodward, University Center (Ponca City) and OPSU (Goodwell) _____ miles

Please give a brief explanation of why you need the class(es) sent to this site. _____

Request for class to be sent to student's personal computer via Zoom software: □ Yes □ No
(Student will be required to download onto a personal computer Zoom software in order to receive a class on a personal computer.)

******************************* **Approval** *******************************

Faculty member: _____ Approved/Denied** Approval date _____
Rationale if denied: _____

Division/ Department Chair: _____ Approved/Denied** Approval date _____
Rationale if denied: _____

Associate Dean of Graduate Studies: _____ Approved/Denied** Approval date _____
Rationale if denied: _____

ITV Coordinator: _____ Approved/Denied** Approval date _____
Rationale if denied: _____

Note: If class is approved forward copy of form to the Registry Office so that key numbers can be assigned.