

COURSELEAF CATALOG: FACULTY LISTING CORRECTION REQUEST

Please, submit CourseLeaf Catalog: Faculty Listing Correction Request forms to Academic Affairs (facultyrecords@shsu.edu).

Request Date: _____

College: _____

Department: _____

Catalog Page:

Undergraduate ☐ Graduate ☐ Both ☐

Correction:

**Note: Please, include all respective dates. (Explanation example: Dr. Blank left the university on 08/31/20.)*

Faculty Name	Sam ID	Needed	Explanation
		Choose an item.	
		Choose an item.	
		Choose an item.	
		Choose an item.	

Chair Signature: _____ **Date:** _____

Academic Affairs Signature: _____ **Corrected Date:** _____

APPD Signature: _____ **APPD Catalog Verification Date:** _____