

Alternative (Off-Campus) Location Request

Purpose: Used to by faculty, department and/or college/school to initiate the process to offer all, or any portion of a Marquette program or class, at an off-site location.

Instructions:

1. Complete Sections 1-3 of this form, using a computer.
 - a. complete one form for each course or degree program.
 - b. a handwritten form will not be accepted.
 - c. an incomplete form will not be processed and will be returned to you for completion.

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Section 4: Required Signatures

Requestor's signature _____ Date _____

Faculty's signature (for class) or Director's Signature (for program) _____ Date _____
if different than requestor

Dean/Dean Designee's signature _____ Date _____
college/school offering class or degree program

Office of the Registrar (OTR) and Office of General Counsel (OGC) Use Only

OTR

Received in OTR by _____ Date _____

Forwarded to OGC by _____ Date _____

OGC

Contract/Document Number/Name _____ Date _____

Contract/Approval Letter forwarded to Requestor by _____ Date _____

Copy of Approved Contract/Approval Letter forwarded to OTR by _____ Date _____

Vice Provost (for program locations only)

Approved Denied Rationale for denial _____

Signature: _____ Date _____

OTR

OSFA notified by _____ Date _____

Vice Provosts notified by _____ Date _____