

Data Collection for Class Scheduling 2012-2013

Course Constraint Form

Part A - COURSE INFORMATION

*Note: * required fields to be entered*

Term*	<input type="text"/>	Campus*	<input type="text"/>	Other (specify)	<input type="text"/>
Faculty*	<input type="text"/>	Dept*	<input type="text"/>		
Course Subject*	<input type="text"/>	Course Number*	<input type="text"/>	CRN*	<input type="text"/>
				Section*	<input type="text"/>
Course given by	<input type="text"/>	Instructor Name	<input type="text"/>		

Part B - SECTION CONSTRAINTS

CONSTRAINT TYPE <i>(Please add if the constraint is not listed below)</i>	REASON AND DETAIL
Time constraints - Schedule after / before <i>(e.g. Afternoons due to morning setup time)</i>	<input type="text"/>
Day constraints - Cannot be scheduled on a particular day	<input type="text"/>
Other constraints (specify)	<input type="text"/>

Part C - THE ABOVE COURSE SECTION HAS TIE CONSTRAINTS WITH THE FOLLOWING SECTION(S):

(separate multiple sections with commas)

Course Subject(s)	<input type="text"/>	Course Number(s)	<input type="text"/>
CRN(s)	<input type="text"/>	Section(s)	<input type="text"/>
Tie Constraint Type			
<input type="checkbox"/> Same day	<input type="checkbox"/> Different day	<input type="checkbox"/> Consecutive days	<input type="checkbox"/> Before or After
<input type="checkbox"/> Same room	<input type="checkbox"/> Same time	<input type="checkbox"/> One day gap	<input type="checkbox"/> Before
<input type="checkbox"/> Different room	<input type="checkbox"/> Same bldg	<input type="checkbox"/> Two days gap	<input type="checkbox"/> After
			<input type="checkbox"/> Back to back
			<input type="checkbox"/> Not allow back to back
Other (specify)	<input type="text"/>		

Form filled by: (Name ; Title)*	<input type="text"/>	Date:*	<input type="text"/>
(For ES use only) Data input by:	<input type="text"/>	Date:	<input type="text"/>