2017-2018 DASL MASTER SCHEDULE OF COURSES

Teacher's Name: _____

Name of Course	Type of Course	Semester 1 or 2 or Full Year (be clear)	Days Taught (MTWThF)	<u>Credits</u>
1				
2				
3				
4				
5				
6				

Form Instructions:

- This form is for additions or corrections ONLY
- Courses are needed for all classes that you teach K-12
- List all classes the student is receiving that are not on your course list
- Period is not important for class scheduling
- If you have a course that is offered 1st semester and then 2nd semester (as well as nine week courses) they must each be listed as individual courses on this schedule. (Separately!)