[](https://liveplymouthac.sharepoint.com/sites/u212/Logo%20files/UoP%20Logo_Centred_Colour.jpg)

**Timetable Change Request**

Requested by: Department/School:

Date:

|  |  |  |
| --- | --- | --- |
| **Module code:** |  | |
| **Activity name:** |  | |
| University week activity scheduled: |  | |
| Day of the week activity scheduled: |  | |
| Date activity scheduled: |  | |
| Time activity scheduled: |  | |
| Room(s) activity scheduled in: |  | |
| Reason for change request  **(please select by placing an X next to relevant item):** | 1) Group size exceeds the capacity of the allocated teaching room |  |
| 2) The allocated room is unsuitable for students and/or staff with a disability |  |
| 3) Session no longer required |  |
| 4) Allocated room (significantly) too large |  |
| 5) Allocated room unsuitable for purpose |  |
| 6) Other - please detail and forward to STC for Dean's approval |  |

Please provide in the box below, rationale for the change to the final timetable and why this was not requested at the draft stage:

|  |
| --- |
|  |

Details of change required:

|  |
| --- |
|  |

Please forward this form to your School Timetabling Coordinator for consideration.

***For completion by the School Timetabling Coordinator or Dean if applicable:***

Approved by:…………………………………(Email approved form to timetabling@plymouth.ac.uk)

Declined by:……………………………………………..(Return declined form to sender)

Date:………………………………………………………