

Initial Course Roster

<i>Course Approval #:</i> _____	<i>Start Date:</i> _____	<i>Course coordinator:</i> _____
<i>Sponsoring Agency:</i> _____	<i>End Date:</i> _____	<i>Coordinator email:</i> _____
<i>Course location:</i> _____		

Student Information

	Last Name	First Name	MI	Email	Address	Contact #
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

Received by Region: _____

Email roster to bcg@uab.edu

Initial Course Roster

Course Approval #: _____ Start Date: _____ Course coordinator: _____
 Sponsoring Agency: _____ End Date: _____ Coordinator email: _____
 Course location: _____

Student Information

	Last Name	First Name	MI	Email	Address	Contact #
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						

Received by Region: _____

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