COLORADO STATE UNIVERSITY

Office of the Registrar
Division of Enrollment and Access
Centennial Hall
1063 Campus Delivery
Fort Collins, CO 80523-1063

Course Description Request

Name during attendance at CSU: _____

CSUID: _____ or Birth Date: _____

Pronouns (Optional): _____

Course descriptions since 1993 are available at no charge to print on demand by going to http://registrar.colostate.edu/curriculum/historical-general-catalogs/ . For course descriptions prior to 1993, please complete the form below and fax to 970-491-2283, scan and email to registrarsoffice@colostate.edu or mail to Office of the Registrar, Colorado State University, 1063 Campus Delivery, Fort Collins, CO 80523-1063.

Course Prefix & No.	Course Title	Term/Year

Please mail or e-mail to this address: _____

_____

_____

Your email address: _____ Phone: _____

Signature: _____ Date: _____

Please allow 3 business days for requests to be processed.

Processed by: _____

Revised: May 2021