

# Schedule Card

Please indicate Office Hours

Name \_\_\_\_\_ Office Phone \_\_\_\_\_

Office Number \_\_\_\_\_ Email Address \_\_\_\_\_

Hour	Mon/Rm	Tues/Rm	Wed/Rm	Thurs/Rm	Fri/Rm
7:25-8:15					
8:30-9:20					
9:35-10:25					
10:40-11:30					
11:45-12:35					
12:50-1:40					
1:55-2:45					
3:00-3:50					
4:05-4:55					

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