



**University of South Carolina - Office of the Provost**

**COURSE BUYOUT REQUEST**

*This form is to be submitted with any supporting documentation in the academic year PRIOR to the requested course buyout.*

Your Name: \_\_\_\_\_ USC ID: \_\_\_\_\_

College: \_\_\_\_\_

Title: \_\_\_\_\_

Semester(s) of buyout request (i.e., fall 2015, spring 2016...) \_\_\_\_\_

Source of buyout

Courses requesting to buyout: (i.e., SPAN 210-001)

SEMESTER	PREFIX	COURSE	SECTION
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____