

**Southern Illinois University School of Medicine, Class of 2009**  
**Scheduling Request Form for Year Three Option Periods, Academic Year 2007-2008**

**Option Periods**

Name: \_\_\_\_\_

1<sup>st</sup>: Wks. \_\_\_\_\_ & \_\_\_\_\_  
 2<sup>nd</sup>: Wks. \_\_\_\_\_ & \_\_\_\_\_

Wk#	Date	Wk#	Date	Wk#	Date	Wk#	Date
01,	July 9, 2007	14,	October 8	27,	January 7, 2008	40,	April 7*
02,	July 16	15,	October 15	28,	January 14	41,	April 14*
03,	July 23	16,	October 22	29,	January 21	42,	April 21*
04,	July 30	17,	October 29	30,	January 28	43,	April 28
05,	August 6	18,	November 5	31,	February 4	44,	May 5
06,	August 13	19,	November 12	32,	February 11	45,	May 12
07,	August 20	20,	November 19 (T'giving)	33,	February 18	46,	May 19
08,	August 27	21,	November 26	34,	February 25	47,	May 26
09,	September 3	22,	December 3	35,	March 3	48,	June 2
10,	September 10	23,	December 10	36,	March 10	49,	June 9
11,	September 17*	24,	December 17	37,	March 17	50,	June 16
12,	September 24*	25,	December 24 (Holiday)	38,	March 24	51,	June 23
13,	October 1	26,	December 31 (Holiday)	39,	March 31*	52,	June 30

**\*Year Three Option Periods**

Option Periods				
Week	Course #	Course Title	Faculty	Length
<b>Week 11</b>				
Priority 1				
Priority 2				
Priority 3				
Priority 4				
<b>Week 12</b>				
Priority 1				
Priority 2				
Priority 3				
Priority 4				
<b>Week 39</b>				
Priority 1				
Priority 2				
Priority 3				
Priority 4				
<b>Week 40</b>				
Priority 1				
Priority 2				
Priority 3				
Priority 4				
<b>Week 41</b>				
Priority 1				
Priority 2				
Priority 3				
Priority 4				
<b>Week 42</b>				
Priority 1				
Priority 2				
Priority 3				
Priority 4				

<i>Student Signature</i>	<i>Date</i>
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**This form must be submitted by Friday, May 25, 2007**