



# HOSTOS COMMUNITY COLLEGE OFFICE OF THE REGISTRAR

Name \_\_\_\_\_ Semester: \_\_\_\_\_  
Nombre: \_\_\_\_\_ Semestre: \_\_\_\_\_  
Last Name First Name

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Section 1 8:00 AM - 9:15 AM							
Section 2 9:30 AM - 10:45 AM							
Section 3 11:00 AM- 12:15 PM							
Section 4 12:30 PM- 1:45 PM							
Section 5 2:00 PM - 3:15 PM							
Section 6 3:30 PM - 4:45 PM							
Section 7 5:30 PM - 6:45 PM							
Section 8 7:00 PM - 8:15 PM							
Section 9 8:30 PM - 9:45 PM							