NEW COURSE PROPOSAL

Title of New Course Proposal ______________________________________________________________

Proposed Course Number: ____________ Credit Hours: ____________ Division/School: ____________

Prerequisites: ___________________________ Semesters Offered: ___________________________

Catalog Appropriate Course Description (required): _________________________________________

Assess the University’s resources for offering this course (library, computer, labs, equipment, etc.):  
__________________________________________________________________________________

What adjustments need to be made to enable this course to be offered (course dropped, additional staffing, schedule adjustments, additional equipment, etc.)?  
__________________________________________________________________________________

CHANGES TO CURRENT COURSE

Course Number: ____________ Credit Hours: ____________ Division/School: ____________

Prerequisites: ___________________________ Delete Course

Proposed Changes to Course: ______________________________________________________________

Proposed Change Type

From

To

Instructor

Signature

Date

School/Division Approval

Dean/Division Chair

Date

Academic Programs Committee Approval

Chair

Date

Vice President for Academic Affairs

Signature

Date

All signatures need to be secured in the order listed.