

CURRICULUM MODIFICATION PROPOSAL FOR NEW COURSE

→ Please refer to the [Curriculum Modification Guide](#) before submitting a proposal.

(One course per form)

Date:

Department:

Proposer:

Course Number:

Title:

Hours: Class Hour, Lab Hours

Credits: Credits

Prerequisite(s):

Corequisite(s):

Course Description:

Rationale: (add additional pages as needed)

CURRICULUM MODIFICATION Questions:

| | | Y | N |
|---|---|---|---|
| 1. | Has the department approved the modification and recorded the approval in the minutes? | | |
| Date of Meeting: <input style="width: 50%;" type="text"/> | | | |
| 2. | Has the department consulted with the academic dean? | | |
| 3. | Will other departments be affected by this change? | | |
| If so, which ones: | | | |
| 4. | Does the content of this course overlap with other courses in the College? | | |
| If so, which ones: <input style="width: 50%;" type="text"/> | | | |
| 5. | Is this course is a(an): <input type="checkbox"/> elective within the dept. <input type="checkbox"/> required within the dept. <input type="checkbox"/> free elective <input type="checkbox"/> other <input style="width: 40%;" type="text"/> | | |
| 6. | Will you submit this proposal to the Arts and Sciences Core Curriculum Committee for inclusion in Pathways? | | |
| 7. | How many faculty members are qualified to teach this course? | | |
| 8. | When will this course be offered? <input type="checkbox"/> spring <input type="checkbox"/> summer <input type="checkbox"/> fall <input type="checkbox"/> day <input type="checkbox"/> evening | | |
| 9. | Are there minor changes to your Curriculum that will need to be made as a result of this new course? | | |
| 10. | Has the Advisory Board recommended this change? | | |
| If so, when? <input style="width: 50%;" type="text"/> | | | |

Signatures:

Academic Dean

Date

Chairperson

Date

Please attach:

- Course Outline
- Summary of Student Survey Results (optional)
- Library Form
- Consultation with Affected Department(s)
- Chancellor's Report