This Form should be used whenever a School/College proposes a new course or modifies an existing course. Please fill in the appropriate blanks and follow the Curricular Review Procedures located in the Academic Policy Manual. Catalog Course Changes become effective the summer of each new catalog year, unless granted special permission by the Office of Academic Affairs.

Submit by December 1 for inclusion in 2013-14 catalog. If received after December 3, this form will be held for the next catalog cycle.

COURSE INFORMATION

Subject: __________ Course Number: __________ Change becomes effective: Summer Qtr. 2013 Year

Course Title (30 characters): each block represents a letter, a space or a character.

Publication Title (Up to 100 characters) ____________________________________________________________

New Course [ ] (fill in all appropriate information) [ ] Change to course (Fill in only those items that need to be changed) [ ] Inactivate Course

School/College: ____________________ Department (Determines Catalog Grouping): ____________________

Special Approval: ____________________ (i.e.: Instructor Signature)

Credits: Minimum ________ Maximum ________ Please circle the appropriate Level: UG GR DR

Repeatable: Yes [ ] No [ ] If YES, choose one: (1) # of Times: __________ (2) Total # of Credits: ________

Grading Mode: __________ (see directions for options) Schedule Types: __________ __________ (see directions for options)

(R or I) (L or N)

Co-Requisites: ____________________ Pre-Requisites: ____________________ Concurrent: Yes [ ] No [ ] (circle one)

Equivalents: ____________________ (i.e. - Math 1360 is equivalent to Bus 1360)

Tuition Detail Code: __________ Description: ____________________ Amt: ________ Per Credit/Flat (circle one)

Fee Code: ____________________ Description: ____________________ Amt: ________ Per Credit/Flat (circle one)

Catalog Text Description: ____________________________________________________________

Degree Attributes: Undergraduate courses only

Common Curriculum (____) Foundation (______) Ways of Knowing (______) Ways of Engaging (_______)

(Requires Curriculum Committee approval) indicate category indicate category indicate category

Circle all that apply Upper Division Distance Learning Writing (Director: Campus Writing must approve)

Registration Restrictions: (indicate all those that apply and circle the appropriate restrictions)

Class: ____________________ Include/Exclude Level: ____________________ Include/Exclude

Major: ____________________ Include/Exclude School: ____________________ Include/Exclude

I/We approve this course under the conditions listed above.

1. Department Chair: ____________________ Date: __________

2. Graduate Director: ____________________ Date: __________

3. School/College Dean: ____________________ Date: __________

4. Curriculum Committee: ____________________ Date: __________

SAS Use Only: Entered By: ____________________ Date: __________