OFFICE OF ACADEMIC AFFAIRS

COURSE APPROVAL FORM NEW COURSE



College:	Prefix/Subject Code:		Course Number:	
Banner Title: (32 Characters)		Credit Hours:		Spring Summer
Full Course Name:				
Onlin Instructional Method:	e Hybrid Classro	om Cross-listed:_	rses must provide	
Min. Grade:		Catalog Descr	ription: (300 Ch	aracters)
Co-requisites:			<u> </u>	
Prerequisites with Concurr	ency:	_		
Restrictions:		_		
Class, Level, Department, Prog				
A-F A-N Grading System: □ □ Does this course involve m	ultiple academic		ng college?	Yes \(\) No \(\)
If so, the chair of each academi	c unit must sign this	form.		
Does this course involve a If so, deans of all colleges invol			ng college?	Yes No No
Is this a Laboratory course If yes, indicate the number of cr				Yes No
Lab Hours:_	Contact H	ours <u>:</u> Total C	redit Hours:	
Indicate type and hours for	studio, clinical, ir	nternship, and study	abroad course	s.
Studio Course	Studio Hours:	Contact Hours:_	Total Cı	redit Hours:
Clinical Course	Clinical Hours:	Contact Hours:_	Total Cı	redit Hours:
☐ Internship	Internship Hours:_	Contact Hours:_	Total Cı	redit Hours:
Study Abroad	Abroad Hours:	Contact Hours:_	Total Cı	redit Hours:

Compare with existing catalog offerings,	with justification if apparent overlap:
Discuss demonstrated value of course. Pl	lease justify why this new course is needed.
Will this course be required? Explain.	
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Is this course part of a program core? Exp	plain.
Is this course part of a new major or mino	or? Explain.
Textbooks:	
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Implications for faculty workload:	
Implications for facilities:	
A detailed syllabus must be attached giving structure, grading system, and policies.	ng an overview of topics covered, course goals and
Department Chair:	Grad. Council:
College Dean:	Graduate Dean:
Undergrad Curriculum Cmte:	Provost: