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| **California State University San Marcos FORM T** NEW TOPIC PROPOSAL Note: The proposed topic below can only be offered two times.  Is GE credit being requested?  Yes  No  If so, which area(s)?  Please attach the GE form to this form for the area requested.  Please attach a section add form.  1. College of:  CHABSS  CoBA  CoEHHS  CSM 2. Center/Program/Department:  3. Instructor  4. Topic Abbreviation and Number:       5. Grading Method:    6. Term:       7. Year:       8. Variable Units:\*  9. Has this topic been offered previously:  Yes  No If yes, indicate term(s)      Year:  10 Topic Title:  ***(Titles using jargon, slang, copyrighted names, trade names, or any non-essential punctuation may not be used.)***  11. Abbreviated Title for PeopleSoft: *(no more than 25 characters, including spaces)*  ST:  12. Topic Description: Note: This part can be skipped if answer to part 9 is “yes.” Please provide detailed information about the topic. Please type. You may also attach the topic description on a separate sheet if you do not have enough space.    13. Does this topic have prerequisites?  Yes  No  14. Does this topic have co-requisites?  Yes  No  15. Does the topic require consent for enrollment?  Yes  No  Faculty  Credential Analyst  Dean  Program/Center/Department - Director/Chair  16. Is topic crosslisted  Yes  No If yes, indicate which course       and obtain signature in #18.  17. Justification for offering this topic.    \* Enter units only if this is a variable-units topic course. |
| California State University, San Marcos FORM TPage 2 18. Does this topic impact any other disciplines? Note: This number can be skipped if answer to part 9 is “yes.” **(*If there is any uncertainty as to whether a particular discipline is affected, check “yes” and obtain signature****.)*  Yes  No If yes, obtain signature(s). Any objections should be stated in writing and attached to this form.    Discipline \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_Support \_\_\_\_\_\_Oppose  Signature Date    Discipline \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_Support \_\_\_\_\_\_Oppose  Signature Date    1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  Originator (Please Print) Date Dean of College (or Designee) Date  2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  Program/Center/Department – Director/Chair Date Associate VP Academic Programs Date    3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  College Curriculum Comm. Rep. Date | |