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| --- | --- | --- |
| **ORIGINATOR’S SECTION:** |  | |
| **1. College:**  **CHABSS**  **CoBA**  **CoEHHS  CSM** | **Desired Term and Year of Implementation (e.g., Fall 2008):** |  |
| **2. Current Course abbreviation and Number:** | | |

**TYPE OF CHANGE(S). Check √ all that apply.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course Number Change** |  | **Delete Prerequisite** |  | **Other Prerequisite Change** |  |
| **Course Title Change** |  | **Add Corequisite** |  | **Grading Method Change** |  |
| **Unit Value Change** |  | **Delete Corequisite** |  | **Mode of Instruction Change (C/S Number)** |  |
| **Description Change** |  | **Add Consent for Enrollment** |  | **Consider for G.E.**  If yes, also fill out appropriate GE form. |  |
| **Add Prerequisite** |  | **Delete Consent for Enrollment** |  | **Cross-list** |  |

**Information in this section– both current and new – is required only for items checked (√) above.**

**NEW INFORMATION:**

|  |  |
| --- | --- |
| **CURRENT INFORMATION:** | **Course abbreviation and Number:** |
| **3. Title:** | **Title: *(Titles using jargon, slang, copyrighted names, trade names, or any non-essential punctuation may not be used.)*** |
| **4. Abbreviated Title for Banner *(no more than 25 characters):*** | **Abbreviated Title for PeopleSoft: *(no more than 25 characters, including spaces)*** |
| **5. Number of Units:** | **Number of Units:** |
| **6. Catalog Description:** | **Catalog Description: *(Not to exceed 80 words; language should conform to catalog copy. Please consult the catalog for models of style and format; include all necessary information regarding consent for enrollment, pre- and/or corequisites, repeated enrollment, crosslisting, as detailed below. Such information does not count toward the 80-word limit.)*** |
| **7. Mode of Instruction\* (*See pages 17-23 at http://www.calstate.edu/cim/data-elem-dic/APDB-Transaction-DED-SectionV.pdf*** *for definitions of the Course Classification Numbers)*   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Type of Instruction** | **Number of Credit Units** | **Instructional Mode (Course Classification Number)** |  | **Type of Instruction** | **Number of Credit Units** | **Instructional Mode (Course Classification Number)** | | **Lecture** |  |  |  | **Lecture** |  |  | | **Activity** |  |  |  | **Activity** |  |  | | **Lab** |  |  |  | **Lab** |  |  | | |
| **8. Grading Method:\***  Normal (N)*(Allows Letter Grade +/-, and Credit/No Credit)*  Normal Plus Report-in-Progress (NP)*(Allows Letter Grade +/-, Credit/No Credit, and Report-in-Progress)*  Credit/No Credit Only (C)  Credit/No Credit or Report-in-Progress Only (CP)) | **Grading Method:\***  Normal (N)*(Allows Letter Grade +/-, and Credit/No Credit)*  Normal Plus Report-in-Progress (NP)*(Allows Letter Grade +/-, Credit/No Credit, and Report-in-Progress)*  Credit/No Credit Only (C)  Credit/No Credit or Report-in-Progress Only (CP)) |
| 9. If the NP or CP grading system was selected, please explain the need for this grade option. | |
| **10. Course Requires Consent for Enrollment?**   Yes  No  Faculty  Credential Analyst  Dean  Program/Department/Director/Chair | **Course Requires Consent for Enrollment?**   Yes  No  Faculty  Credential Analyst  Dean  Program/Department/Director/Chair |
| **11. Course Can be Taken for Credit More than Once?** Yes  No  If yes, how many times (including first offering) | **Course Can be Taken for Credit More than Once?** Yes  No  If yes, how many times (including first offering) |
| **12. Is Course Cross Listed:** Yes  No  If yes, indicate which course | **Is Course Cross-listed?** Yes  No  If yes, indicate which course       and check “yes” in item #17 below. |
| **13. Prerequisite(s):** | **Prerequisite(s):** |
| **14. Corequisite(s):** | **Corequisite(s):** |
| **15. Documentation attached:**  Syllabus  Detailed Course Outline | |
|  | |
| **PROGRAM DIRECTOR/CHAIR - COLLEGE CURRICULUM COMMITTEE SECTION:**  ***(Mandatory information – all items in this section must be completed.)*** | |
| **16. Does this course fulfill a requirement for any major (i.e. core course or elective**  **for a major, majors in other departments, minors in other departments?**  **Yes**  **No**  **If yes, please specify:** | |
| **17. Does this course change impact other discipline(s)? (*If there is any uncertainty as to whether a particular discipline is affected, check “yes” and obtain signature****.)* Check “yes” if the course is cross-listed.  **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 | |
| **18. Reason(s) for changing this course:** | |

**SIGNATURES : (COLLEGE LEVEL) : (UNIVERSITY LEVEL)**

1. Originator (Please Print) Date 5. UCC Committee Chair Date

2. Program Director/Chair Date 6. Vice President for Academic Affairs (or Designee) Date

3. College Curriculum Committee Date 7. President (or Designee) Date

4. College Dean (or Designee) Date