**COURSE REVISION PROPOSAL**

**All forms must be submitted with:**

**Department minutes showing discussion/approval, proposed Master Syllabus and signed hard copy to Academic Affairs.**

**Fill in section 1 and 2. If there is a change in Learning Outcomes or Credit Hours, also fill in section 3 and/or 4.**

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| --- |
| **Section 1 – GENERAL INFORMATION:** |
| Initiator: Click here to enter text. | Department: Click here to enter text. | Date Submitted: Click here to enter a date.  | Effective Term/Year: Click here to enter text. |
| E-mail: Click here to enter text. | Phone Number: Click here to enter text. | Course Prefix & Number: Click here to enter text. | State Mandated? [ ] Yes [x] No |
| **Section 2 – COURSE DETAIL (fill in ONLY SECTIONS THAT ARE CHANGING)** |
| **FROM** | **TO** |
| Course Prefix & Number: Click here to enter text. | Course Prefix & Number: Click here to enter text. |
| Course Title: Click here to enter text. | Course Title: Click here to enter text. |
| Number of Credits - also fill in section 4: Click here to enter text. | Number of Credits - also fill in section 4: Click here to enter text. |
| Weekly Contact Hours: Click here to enter text. | Weekly Contact Hours: Click here to enter text. |
| Total Course Contact Hours: Click here to enter text. | Total Course Contact Hours: Click here to enter text. |
| Pre-Requisites: Click here to enter text. | Pre-Requisites: Click here to enter text. |
| Co-Requisites: Click here to enter text. | Co-Requisites: Click here to enter text. |
| Catalog Description: .  | Catalog Description: Click here to enter text. |
| Terms offered: [ ]  Fall [ ]  Spring [ ]  Summer | Term offered: [ ]  Fall [ ]  Spring [ ]  Summer |
| Delivery Method: Click here to enter text. | Delivery Method: Click here to enter text. |
| Faculty Credentials: Click here to enter text. | Faculty Credentials: Click here to enter text. |
| Fees: Click here to enter text. | Fees: Click here to enter text. |
| Other: Click here to enter text. |
| Rational for modifying course: |
| **Section 3 – PROPOSED LEARNING OUTCOMES (only complete this section if learning outcomes are changing) General Education** [ ]  **Non-General Education** [ ]  |
| **Course/ Student Learning Outcome** | **Corresponding Program Level Learning Outcome** | **Corresponding General Education Outcome (if applicable. You may select more than one)** | **Proposed Assessment Method** |
| Click here to enter text. | Click here to enter text. | [ ]  Communications[ ]  Quantitative and Scientific Reasoning[ ]  Critical Thinking[ ]  Global and Social Diversity[ ]  Information Literacy | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | [ ]  Communications[ ]  Quantitative and Scientific Reasoning[ ]  Critical Thinking[ ]  Global and Social Diversity[ ]  Information Literacy | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | [ ]  Communications[ ]  Quantitative and Scientific Reasoning[ ]  Critical Thinking[ ]  Global and Social Diversity[ ]  Information Literacy | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | [ ]  Communications[ ]  Quantitative and Scientific Reasoning[ ]  Critical Thinking[ ]  Global and Social Diversity[ ]  Information Literacy | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | [ ]  Communications[ ]  Quantitative and Scientific Reasoning[ ]  Critical Thinking[ ]  Global and Social Diversity[ ]  Information Literacy | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | [ ]  Communications[ ]  Quantitative and Scientific Reasoning[ ]  Critical Thinking[ ]  Global and Social Diversity[ ]  Information Literacy | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | [ ]  Communications[ ]  Quantitative and Scientific Reasoning[ ]  Critical Thinking[ ]  Global and Social Diversity[ ]  Information Literacy | Click here to enter text. |
| **Section 4 –CREDIT HOUR ESTIMATE (proposed) (only complete this section if credit hours are changing)** |
| **Instructional or Learning Activity** | **Estimated Number of Minutes**  |
| On-campus meetings (direct instruction, in-class lectures, demonstrations, recitations) | Click here to enter text. |
| Practical experiences (lab experiences, studio activities, clinical assignments, field experience) | Click here to enter text. |
| Group or team-based activities (group projects or presentations, debates, group assessments) | Click here to enter text. |
| Reviewing online course content (audio/video lectures, podcasts, written lectures) | Click here to enter text. |
| Readings (assigned readings, additional readings, websites, articles) | Click here to enter text. |
| Projects/Presentations (oral presentations, portfolios, multimedia presentations) | Click here to enter text. |
| Practice problems or exercises (drills, practice problems, exam reviews) | Click here to enter text. |
| Online discussions (discussion forums, wikis) | Click here to enter text. |
| Synchronous activities (videoconferences, audio chat, text chats) | Click here to enter text. |
| Writing activities (papers, essays, journal entries, blogs) | Click here to enter text. |
| Research activities (literature review, individualized study, research study) | Click here to enter text. |
| Quizzes or exams (written, computer-based, online) | Click here to enter text. |
| Inquiry-based activities (web quest, problem-based or self-directed learning) | Click here to enter text. |
| Other (please list): Click here to enter text. | Click here to enter text. |
| **TOTAL MINUTES:**  | Click here to enter text. |

**CURRICULUM PROPOSAL - Signatures**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Person submitting proposal Date

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Dean/Director of Division submitting proposal Date

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Dean/ Director of other affected Division Date

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Dean/ Director of other affected Division Date

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Provost/ VP for Academic Affairs Date

Office Use only:

Date presented to APC: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date approved by APC: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date approved by BOT: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_