

**Academic Year 22-23**

**MODIFICATION OF EXISTING COURSE**

Modification(s) being requested (please check all that are appropriate):

□ Change in course title and/or number (no substantive change to course)

□ Change in course catalog description

□ Change in prerequisites and/or corequisites

□ Change in credit hours

□ Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Important Notes:**

1. If these changes affects any degree maps, the “Change in Degree Map” form must accompany this form.

**INSTRUCTIONS:**

1. Dean or designee completes form and forwards intact to Academic Senate Curriculum Committee **with, if appropriate, a change in degree map form and any new courses (form and syllabus)**.
2. Curriculum Committee forwards to Senate with recommendations and then to Vice President of Academic Affairs following Senate action.
3. Vice President of Academic Affairs will keep one copy and distribute others to Registrar, appropriate Dean, and Publications.

**Complete this section for all courses:**

Current course prefix, number, and title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester Hrs. credit\_\_\_\_\_\_\_\_\_\_ Proposed effective term:

Note that all changes to degree maps must be approved by the Academic Senate in the Fall semester in order to go into the catalog for the following academic year.

**Rationale for proposed changes. (If your proposed change is a result of assessment, please provide a brief description):**

**Complete the appropriate section(s) below:**

**Change in Course Title and/or Number (no substantive changes to the course):**

Requesting new title? ◻Yes ◻No If yes, please specify:

Requesting new number? ◻Yes ◻No

Will this course replace an existing course? ◻Yes ◻No If yes, please specify:

Does this change affect any degree maps? ◻Yes ◻No If yes, list affected degree maps and attach “Change in Degree Map” form for each: Have the appropriate program chairs been notified? ◻Yes ◻No **Change in Catalog Description:**

NOTE: If this change in description will **significantly** alter the contents of this course, a new course name and number should be requested. Please use the “Request for New Course” form.

|  |  |
| --- | --- |
| **Current Course Catalog Description:**  | **Proposed New/Revised Course Catalog Description:**  |

**Change in Prerequisite and/or Corequisite:**

|  |  |
| --- | --- |
| **Current Prerequisite/Co-requisite:**  Prerequisite: Co-requisite:   | **Proposed New/Revised Prerequisite/Co-requisite:**  Prerequisite: Co-requisite:  |

**Change in credit hours (also requires a new course number):**

|  |  |
| --- | --- |
| Current Credit Hours (e.g., 3-0-3):  | Proposed Credit Hours (e.g., 3-0-3): |
| Rationale:  |  |

**Other changes (e.g., mode of grading, course equivalencies, etc.):**

|  |  |
| --- | --- |
| Current:  | Proposed: |
| Rationale:  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  1. Requested by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Faculty Member   |  Date\_\_\_\_\_\_\_\_  |  2. Approved by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Department Chair  |  Date\_\_\_\_\_\_\_\_  |
|  3. Approved by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  Date\_\_\_\_\_\_\_\_  |  4. Approved by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  Date\_\_\_\_\_\_\_ |
|  Dean or Designee   |  |  Academic Senate (President or Secretary)  | \_  |
|  5. Approved by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Vice President of Academic Affairs   |  Date\_\_\_\_\_\_\_\_  |  6. Approved by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Registrar  |  Date\_\_\_\_\_\_\_\_  |