

School: \_\_\_\_\_ Department: \_\_\_\_\_ Prepared by: \_\_\_\_\_ Ext.: \_\_\_\_\_ Date: \_\_\_\_\_

*Submit this form at least one quarter prior to offering course.*

Department (Discipline)	Course #	Course Title	Units	Workload Credit Only
Abbreviated title: (19 characters only, including spaces)				
Catalogue description (limit, 40 words)				
Corequisite:				
Prerequisite:				
Restriction:				
Cross-Listed with: Dept.(s) & Course # (s) _____ Concurrent with: Dept. & Course # _____				
Overlaps with: Dept. & Course # _____ (Student may not receive credit for both)				

**Action Request**

**Number of Hours per Week**

**Grading Option**

<input type="checkbox"/> New course (attach expanded course outline) <input type="checkbox"/> one year only beginning <input type="checkbox"/> Approve for on-line delivery <input type="checkbox"/> Change course as follows: <input type="checkbox"/> Title <input type="checkbox"/> Description <input type="checkbox"/> Approve for on-line delivery <input type="checkbox"/> Corequisite, prerequisite, or restriction <input type="checkbox"/> Renumber: formerly Dept. & Course # _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> General Education Requirement/s (specify category in box below) <input type="checkbox"/> Multiple listing (forms for cross-listed courses must be submitted simultaneously) <input type="checkbox"/> Delete course <input type="checkbox"/> Deactivate Course <input type="checkbox"/> Renew course: quarter/year last offered _____	<input type="checkbox"/> Lecture <input type="checkbox"/> Seminar <input type="checkbox"/> Discussion <input type="checkbox"/> Laboratory <input type="checkbox"/> Studio <input type="checkbox"/> Field-Work <input type="checkbox"/> Research <input type="checkbox"/> Quiz <input type="checkbox"/> Colloquium <input type="checkbox"/> Tutorial <input type="checkbox"/> Activity	<input type="checkbox"/> Letter grade with P/NP option <input type="checkbox"/> Pass/Not Pass only <input type="checkbox"/> IP (In Progress Grading) <input type="checkbox"/> Letter grade with S/U option <input type="checkbox"/> S/U only  <b>Repeatability</b> <input type="checkbox"/> May be taken once only for credit <input type="checkbox"/> May be taken a total of _____ times <input type="checkbox"/> May be taken for a total of _____ units <input type="checkbox"/> May be repeated unlimited times (as topics vary)
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Required for which Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

Following approval, this action effective beginning (quarter/year) \_\_\_\_\_ Course to be offered: Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

Course sequence (A-B-C-D-etc.): \_\_\_\_\_ Instructor/Title: \_\_\_\_\_

**Justification for Action:** Include any information that will assist in the review of this request (Attach additional sheet if necessary.)

Department Chair: (Type Name) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Dean Director: (Type Name) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved: \_\_\_\_\_  
Committee on Courses/Graduate Council Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved: \_\_\_\_\_  
Committee on Educational Policy Signature \_\_\_\_\_ Date \_\_\_\_\_

**Fulfills General Education Category:**

- I. Writing (attach "Request for UDW" form)
- II. Science and Technology
- III. Social and Behavioral Sciences
- IV. Arts and Humanities
- V. Quantitative, Symbolic, and Computational Reasoning
- VI. Language Other than English
- VII. Multicultural Studies
- VIII. International / Global Studies
- IX. Laboratory or Performance

Registrar's Office:  
Editor's Office: \_\_\_\_\_ Catalogue: \_\_\_\_\_