

REQUEST TO MODIFY OR DELETE COURSE

Order of Action: Submit to Academic Affairs Coordinator with Chair/Director and Dean/Supervisor signatures for review. Requests will then be forwarded to the appropriate committee to begin the approval process.

REQUESTED MODIFICATIONS (CHECK ALL THAT APPLY):

DEPARTMENT	PREREQUISITE(S)	CO-REQUISITE(S)	DESCRIPTION
PREFIX	NUMBER	TITLE	LEVEL
CIP CODE	CONTENT	GRADE MODE	INSTRUCTIONAL MODE
# OF REPEATS	CREDIT HOURS	CONTACT HOURS	CROSS-LISTING
GEN ED CREDIT	DELETE	ADD	LIBERAL ARTS & SCIENCES CREDIT
TEACHER CERTIFICATION?	YES	NO	DELETE
			ADD
			DELETE COURSE?
			YES
			NO

CURRENT COURSE INFORMATION		PROPOSED COURSE INFORMATION	
DEPARTMENT		DEPARTMENT	
PREFIX	NUMBER	PREFIX	NUMBER
TITLE		TITLE	
GRADE MODE	CIP CODE	GRADE MODE	CIP CODE
INSTRUCTIONAL MODE		INSTRUCTIONAL MODE	
CREDIT HRS	CONTACT HRS	CREDIT HRS	CONTACT HRS
NUMBER OF REPEATS		NUMBER OF REPEATS	
REQUIRED FOR PROGRAM(S)		REQUIRED FOR PROGRAM(S)	
ELECTIVE FOR PROGRAM(S)		ELECTIVE FOR PROGRAM(S)	
CROSSLISTED PREFIX & #		CROSSLISTED PREFIX & #	
PREREQUISITE(S) &/OR CO-REQUISITE(S)		PREREQUISITE(S) &/OR CO-REQUISITE(S)	
COURSE DESCRIPTION		COURSE DESCRIPTION	

REASON(S) FOR REQUEST

Department Chair or Director

Date

Dean

Date

OFFICE USE ONLY

GEC _____ TEC _____ CC _____ GC _____ OUBOR _____ SCACRSE _____ SCADETL _____ SCAPREQ _____ SCABASE _____
 CATALOG _____ TRANSPARENCY _____ DGW _____ START TERM _____ INITIALS _____