CURRICULUM CHANGE REQUEST FORM

Proposal Number _____ First reading date _____ Second reading date _____

Division: _____ Effective: Fall 20____ Spring 20____ Summer 20____

See Preparing Curriculum Change Request form for information on required documents to attach to this request.

Program/Major/Concentration Changes

Type of Change: ☐ New Program ☐ New Concentration ☐ Program Termination
☐ Concentration Termination ☐ Paradigm Change ☐ Substantive Change

Current Title: _____ Proposed Title: _____

Program Type: ☐ A.S./A.A. Degree ☐ A.F.A. Degree ☐ A.A.S. Degree ☐ Academic Certificate ☐ Technical Certificate

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Course Changes

Type of Change: ☐ New Course ☐ Title Change-Current Title: _____
☐ Course ID – Current ID _____ Current number of credit hours: _____
☐ Course Description ☐ Course Content ☐ Prerequisite ☐ Co-Requisite
☐ Other: _____

Proposed:

Course Title: _____ Credit Hours: _____

Course ID: _____ (contact Director of Records for ID assignment if changed) Max enrollment per section: _____

Grading: ☐ Conventional (A-F) ☐ Pass/Fail Course can be repeated for up to a maximum of _____ hours Contact

Hours: _____Lecture _____Laboratory _____LEL _____Clinical _____Practicum _____Co-op

Prerequisites: _____

Co-requisites: _____

Course serves as a repeat or replaces grade earned in: _____

Course Type: ☐ Transfer-required in a Tennessee Transfer Pathway ☐ Transfer – Elective only
☐ Technical course in Common Course Curriculum Library ☐ Not designed for transfer

General Education Category: ☐ Communications ☐ History ☐ Humanities/Fine Arts
☐ Natural Sciences ☐ Mathematics ☐ Social/Behavioral Sciences

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			SIGNATURE	DATE
Originator			_____	_____
Coordinator	Approved	Disapproved	_____	_____
Dean	Approved	Disapproved	_____	_____
AVP Faculty & Programs	Approved	Disapproved	_____	_____
Curriculum Committee	Approved	Disapproved	_____	_____
VP, Academic Affairs	Approved	Disapproved	_____	_____
President	Approved	Disapproved	_____	_____

Additional Approval/Notification Required: _____General Education Committee ____TBR _____SACS-COC

Office Use Only: Catalog pages____ Program Flyer____ CAPP____ SCADELT equiv____ SCADETL____ SCAPREQ____ SSAPREQ____
Type credit_____ CIP code_____ Max repeat____ Fee code____ Supple Data/Classification____ Course Description____
Contact group____ Variable credit_____ Max enrollment_____ Course level_____ Grade mode_____ Schedule Type_____