|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course Code**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **New Code**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Present Course Title**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Proposed Course Title**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (if changing) | | | | **DATE 1st READING**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **DATE 2nd READING:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **ADDT’L. READINGS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **APPROVAL DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **EFFECTIVE DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Course Revision** | **New Course** (get course code from Academic Services) | | | | |
| **Course Deactivation** | **Replaces** (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **Course Reactivation** |  | | | | |
| **PRESENT COURSE DESCRIPTION:** | | | | | |
|  | | | | | |
| **PROPOSED COURSE DESCRIPTION** (if changing)**:** | | | | | |
|  | | | | | |
| **Current PREREQUISITE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | **Proposed PREREQUISITE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Current CO-REQUISITE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | **Proposed CO-REQUISITE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Current PRE or CO-REQUISITE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | **Proposed PRE or CO-REQUISITE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Attached Master Syllabus (REQUIRED)?**  Yes **Attached Instructor Syllabus?**  Yes  No | | | | | |
| **COURSE TYPE and CONTACT HOURS:** | | | | | |
| **# Credits:** | | **Lecture Hours:**  **Lab Hours:**  **Studio Hours:**  **Clinical/Co-op Hours:** | | | **Remedial:**  **Other/Seminar:** |
| **Total Contacts:** | |
| **RATIONALE:** (use additional pages if necessary) | | | | | |
|  | | | | | |
| **Initiator:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Initiator signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_  **PRE-REVIEWER 1 SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **PRE-REVIEWER 2 SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Dean Signature** (approving submission)**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |

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| **Course Definition/Restrictions:** | | | | | | | |
| General Education Elective | | Major Only | Major Code: \_\_\_\_\_\_\_\_\_\_ | | | Not Applicable | |
| **Elective Categories:** | | | | | | | |
| Communication |  | | Social Science | |  | | |
| Mathematics |  | | Humanities | |  | | |
| Science |  | | History | |  | | |
| Technology |  | | Diversity | |  | | |
| **All Faculty & Divisions affected by this curriculum change have been consulted. ExplaIN:** | | | | | | | |
|  | | | | | | | |
| **Transferability Forms attached:** (list universities) | | | | | | | |
|  | | | | | | | |
| **To be completed by Division Dean:** | | | | | | | |
| **OFFERED**: ☐ Gloucester ☐ Cumberland ☐ Both | | | | **FEES:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **Division Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | **select Appropriate Fee Code:**  A B C G H I J K O Q R S T W Y | | | |
| **ICN**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | **Materials:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **Differential Funding Code**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | **Insurance:**  Yes  No  (Nursing & Allied Health Only) | | | |
| **APPROVALS**: | | | | | | | |
| **Academic Dean:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Committee Chair:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **VP Academic Services/Provost:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Processed by:** | | | | | | | |
| **Academic SERVICES:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **DISTRIBUTION:** | | | | | | | |
| Academic Division Dean | | | Director(s), Advising | | | | |
| Academic Services | | | Provost | | | | |
| Committee Chair(s) | | | Initiator | | | | |
| Bursar | | | College Scheduler | | | | |
| Financial Aid | | | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |