Graduate Curriculum Change: New Course Proposal

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| Department/program/concentration: |       | Date: |       |
| Subject prefix\*: |      | Is the subject prefix new? | [ ]  Yes | [ ]  No | If YES, include in the proposal justification for creation of the new prefix. |
| Course level: |  | Credit hours:  |       | (if variable credit, enter V) | Common Course Number (if available)\*: |       |
| \*Consult the Arkansas Common Course Number search page at <https://arkansasccn-info-public.courseleaf.com/ccn-index/> for an appropriate subject prefix and course number, if available. |
| If variable, what are the lowest possible credit hours/term? |       | What are the highest possible credit hours/term? |       |
| Can the course be repeated for degree/certificate credit? | [ ]  Yes | [ ]  No | If YES, maximum credit hours allowed? |       |
| Is this a one-semester course? | [ ]  Yes | [ ]  No | If NO, is this the first or second part of a two-semester series? |       |  |
| Will this course be delivered as an online or hybrid course? | [ ]  Yes | [ ]  No |  |
| If YES, submit the Instructional Method Approval: Online Course Delivery form available on the [PandA website](https://uca.edu/panda/curriculum-development-process-guide/cdpg-forms/) after course approval. |
| Short title (≤ 30 characters, including spaces): |       |
| Long title (≤ 100 characters, including spaces): |  |
|       |
| Course type: |  | Will the course use a continuous enrollment grade mode? | [ ]  Yes | [ ]  No |
|  | (If unknown, see the Curriculum Development Process Guide’s FAQ page for a definition.) |
| Prerequisite(s): |       |
| If any prerequisites are offered by another department, attach a signed letter from the department’s chair describing the impact on the department. |
| This course replaces (course prefix and number): |       | Last semester to offer replaced course(s): |       |
| (Note: The replaced course will be deleted – inactivated in Banner and removed from the UBulletin – effective in the term following the term of last offering as indicated above.) |
| Will this course be added as a requirement to a program?  | [ ]  Yes | [ ]  No | If YES, submit Curriculum Form G2-A. |
| Will this course be added as an elective to a program?  | [ ]  Yes | [ ]  No | If YES, submit Curriculum Form G2-I. |

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| If college/department/program fee(s) attach to this course, select applicable fee(s) from these lists: | (1) | Choose an item. | (2) | Choose an item. |

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| Recommended by Department and College |
| 1. |  |  | 2. |  |  |  |
|  | Department Curriculum Committee | Date |  | Department Chair | Date |  |
| 3. |  |  | 4. |  |  |  |
|  | College Curriculum & Assessment Committee | Date |  | College Dean | Date |  |

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| Recommended by University Councils |
|  | Is this course part of a teacher education program? | [ ]  Yes | [ ]  No | 5. |  |  |  |
|  | If YES, must be reviewed by the Professional Education Council. |  | Professional Education Council | Date |  |
| 6. |  |  | 7. |  |  |  |
|  | Graduate Council | Date |  | Council of Deans | Date |  |
| Submit proposals to the appropriate university Council at least one month before the meeting in which action is desired. Summer submissions may not be considered until the fall term. |

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| Approved by | Recorded in the Bulletin by |
| 8. |  |  | 9. |  |  |  |
|  | Provost | Date |  | Office of the Provost | Date |  |
| The Office of the Provost sends a copy to the Office of the Registrar for changes in Degree Works. |
| Recorded in Banner by | Recorded in Degree Works by |
| 10. |  |  | 11. |  |  |  |
|  | Office of the Registrar | Date |  | Graduate School | Date |  |
| The Office of the Registrar sends the signed original to the Graduate School. The Graduate School retains the original and sends a copy to the originating department. |

Address I–VI by typing or pasting the response in the area below each section.

I. BULLETIN DESCRIPTION

Click here to enter text.

II. COURSE GOALS AND LEARNING OUTCOMES

What will students be expected to know and/or do by the end of the course? How will students demonstrate achievement of the course goals? What methods will be used to evaluate student performance? If this course will be double listed as an undergraduate course, explain how the rigor of the graduate course distinguishes it from the undergraduate course.

Click here to enter text.

III. COURSE OUTLINE

What specific topics will be covered? Approximately how much time will be devoted to each topic?

Click here to enter text.

IV. CORE READINGS

What core readings (books, articles, etc.) might be used to achieve the course goals? Use the style guide for listing references appropriate to the discipline. How will the readings be made available to the students (library, internet, purchase, etc.)?

Click here to enter text.

V. PLACE IN THE DEPARTMENTAL PROGRAM

Why is this course being proposed? Is this course a requirement or an elective for an existing or new degree/certificate program? How does it advance the goals and objectives of the degree/certificate program? If this course is being proposed in response to a national or regional accrediting agency, please attach verification.

Click here to enter text.

VI. RESOURCES IN SUPPORT OF THE PROPOSED COURSE

A. Identify the persons who may be assigned to teach this course and the frequency with which it will be taught. Indicate current graduate faculty status for proposed instructors.

Click here to enter text.

B. Describe the expected total enrollments in the proposed course each term. State the impact of this course upon other courses in the departmental program in terms of faculty time and teaching load.

Click here to enter text.

C. Will this course normally be held on campus? If it will be held off-campus (not including online or hybrid courses), describe the off-campus facilities for the course: include, as relevant, classroom space, library access, and the characteristics of library resources, laboratory resources, and faculty office space. Also, outline plans for supervision and evaluation of the off-campus course.

Click here to enter text.

D. Describe any additional resources needed to implement this course.

Click here to enter text.

VII. EFFECTIVE TERM REQUEST

If you wish to request an effective term different from that stipulated in this form’s headnote, indicate the requested effective term here and provide justification. If not, enter N/A.

Click here to enter text.