

This course is available for student registration only after the approval process has been completed.

SUBJECT _____ COURSE NO. _____ CREDIT HOURS _____ TERM TO BE ADDED TO THE FILE _____
Alpha Prefix (e.g., CSE) *Number Choice (e.g., 1301)* *(e.g., Fall 2006)*

CLASS HOURS _____ LECTURE HOURS _____ LAB HOURS _____ CONTACT HOURS (CEU ONLY) _____

DEPARTMENT _____ SCHEDULE TYPE _____
(e.g., Computer Sciences) *(e.g., Lecture, Lab or Special Project)*

- | | |
|--|--|
| <input type="checkbox"/> COLLEGE OF AERONAUTICS-23 | <input type="checkbox"/> COLLEGE OF PSYCHOLOGY AND LIBERAL ARTS-25 |
| <input type="checkbox"/> COLLEGE OF BUSINESS-24 | <input type="checkbox"/> COLLEGE OF SCIENCE-26 |
| <input type="checkbox"/> COLLEGE OF ENGINEERING-01 | <input type="checkbox"/> UNIVERSITY COLLEGE EXTENDED STUDIES-90 |

COMPUTER TITLE *Restricted to 25 characters, including spaces* _____

CATALOG TITLE _____

CATALOG DESCRIPTION OF COURSE *Limited to 350 characters, including spaces* _____

In addition, you may attach a course syllabus and/or more detailed description.

- | | | |
|--------------|---|--|
| RESTRICTIONS | <input type="checkbox"/> Prerequisite _____
<i>Course Number</i> | <input type="checkbox"/> Corequisite _____
<i>Course Number</i> |
| | <input type="checkbox"/> Prerequisite _____
<i>Course Number</i> | <input type="checkbox"/> Corequisite _____
<i>Course Number</i> |
| | <input type="checkbox"/> Prerequisite _____
<i>Course Number</i> | <input type="checkbox"/> Corequisite _____
<i>Course Number</i> |

GRADES TO BE ISSUED

- A, B, C, D, F
 A, B, C, D, F, CEU
 CEU
 S, U
 P, F
 Other _____

ADDITIONAL RESTRICTION _____
(e.g., Major, Class Level, Department Head Approval)

If this course replaces a course currently offered in BANNER, please indicate old course information

SUBJECT *Alpha Prefix (e.g., CSE)* _____ COURSE NO. *(e.g., 1301)* _____

APPROVALS: Upon completion of appropriate department approvals, submit form to Chair, Graduate Council, or Chair, Undergraduate Curriculum Committee for approval below and forward to Catalog Director.

Originator _____ Date _____ Chair, Graduate Council _____ Date _____

Department Head/Program Chair _____ OR _____

Dean or Associate Dean _____ Date _____ Chair, Undergraduate Curriculum Committee _____ Date _____

CATALOG DIRECTOR

These changes/additions have been made for the _____
 University/Extended Studies Catalog and entered into the
 BANNER term named above.

Catalog Director _____ Date _____

REGISTRAR'S USE ONLY

SCACRSE _____ SCADETL _____ SCAPREQ _____ SCABASE _____
 SCARRES _____ Operator Init _____ Date _____

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