HENDERSON STATE UNIVERSITY COURSE CHANGE PROPOSAL

# Submitted to: ☐ University Academic Council ☐ University Graduate Council ☐Both (double listed classes)

**Proposal #\_\_\_\_\_\_\_\_\_\_\_\_**

(If submitting multiple proposals)

**Section I. General Information**

**Dept./School Submitting Proposal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Requested Implementation Date (Semester & Year): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Existing Course: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Include course prefix, number & title)

**Type of proposal (please check all that apply; \* must answer all question in Section III)**

|  |  |
| --- | --- |
| **\_\_\_ Change Subject Prefix\*** | **\_\_\_ Change Course Content\*** |
| **\_\_\_ Change Course Number** | **\_\_\_ Change Cross-listing W/Another Course\*** |
| **\_\_\_ Change Course Title** | **\_\_\_ Change Pre-requisites\*** |
| **\_\_\_ Change Credit Hours (2 cr. to 3 cr., etc.)** | **\_\_\_ Course Repeat Status** |
| **\_\_\_ Change Course Level (1000 to 3000, etc.)** | **\_\_\_ Other (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)** |
| **\_\_\_ Change Will Require Updated Program Check Sheet**  **\_\_\_ Change Will Impact Liberal Arts Core**   * *If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*   *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | |

### Endorsed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

**Department Chair/Administrator**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_**

**Dean or Director**

**Section II. Library Information**

**Will additional resources need to be acquired by the library to support this change?** \_\_\_\_\_\_

**If so, list the necessary resources.**

**Librarian’s Comments & Recommendations**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Librarian’s Signature**

**Section III. Detailed Description of Changes in Existing Course**

**1. Description of proposed change**: Provide a brief narrative of proposed changes. Statements from departments potentially affected by the proposal must be attached, along with any other supporting materials.

**Summary of changes (Existing Vs. New)**

**Old course/requirement/etc. New course/requirement/etc.**

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |

*Questions 2 and 3 are not required if only changing name, course level, or credit hours - unless such changes impact learning outcomes or the methods of evaluating those outcomes.*

**2. What are the student learning outcomes expected as a result of these changes?**

**3. How will you assess whether or not the outcomes have been met (list at least two different methods of assessment)?**

**4. If this proposal has implications for both undergraduate and graduate versions of a course, please provide an explanation of the differences between learning outcomes at the undergraduate vs. graduate level.**

*Last Revised, February 28 2020 (EWM)*