

**SUPPLEMENTARY INFORMATION
FOR NEW COURSE REQUEST**

Oklahoma State University

(To be attached to the Course Action Form. Action cannot be approved without this information.)

DEPARTMENT:

DATE:

COURSE TITLE:

COURSE PREFIX & NUMBER:

1. Effect of the recommended course on your departmental objectives.
 - a. This course is essential as:

Requirement for all majors Option for majors Other:
 General Education option Services course for students in _____
 - b. What current courses of the University most nearly relate to the proposed course, and why are these courses insufficient for your needs?
 - c. Attach course information with faculty (if known), full course outline, course objectives, and grading policy. If graduate credit is sought the course must be either a 5000 or 6000 number. Requests for graduate credit for new 3000 and 4000 level courses will be denied.
2. Effect of recommended course on other departments or programs.
 - a. What other departments or programs could be affected by the recommended course? Explain how.
 - b. Attach an email or letter from head(s) of department(s) affected.
3. Effect of recommended course on the budget.
 - a. Explain how the addition of the recommended course will affect the salary and maintenance budget needs of your department. How will the department pay for the course and cost of supplies or equipment?
 - b. How many sections; what will be the frequency of offerings and anticipated enrollment; and what will be the effect of sequencing on other courses?

Head of Department

Date

Dean of College

Date