



# COURSE ACTION FORM (Effective 2019)

Requested Effective Term: \_\_\_\_\_

Initiating Department: \_\_\_\_\_

Form Completed By: \_\_\_\_\_

**COURSE ACTION TYPE (Check only one):**

NEW Course to Be Added\*     Course to Be Dropped     Change to Existing Course

**CHANGES (Check all that apply):**

Course Prefix/Subject     Course Title     Grade Modes     Level (UG, GR, PR)  
 Course Number\*     Course Description     Course Equivalencies  
 Credit Hour Configuration     Prerequisites     Mutually Exclusive Courses

\*Please check SCACRSE in Banner and SIS screen 128. You must select a new course prefix-number combination that has not been previously used.

**PRESENT COURSE AS LISTED IN THE CATALOG**

Course Prefix/Subject \_\_\_\_\_ Course Number \_\_\_\_\_

Abbreviated Title (30 character max)

Full Title (if more characters needed) \_\_\_\_\_

Total Semester Credit Hours \_\_\_\_\_ (list range for variable credit courses)

Specify credit hours: LEC/TH \_\_\_ LAB \_\_\_ DISC \_\_\_ IS \_\_\_

Cumulative Max Total for **Variable Credit** Courses \_\_\_\_\_

Total Contact Hours (per week) \_\_\_\_\_

Specify contact hours: LEC/TH \_\_\_ LAB \_\_\_ DISC \_\_\_ IS \_\_\_

**Catalog Description of Present Course:**

[Enter description here](#)

Prerequisite(s): [list all prerequisites here using logical operators \("and", "or" and parentheses as needed\).](#)

**RECOMMENDED CHANGE OR NEW COURSE**

Course Prefix/Subject \_\_\_\_\_ Course Number\* \_\_\_\_\_

Abbreviated Title (30 character max)

Full Title (if more characters needed) \_\_\_\_\_

Total Semester Credit Hours \_\_\_\_\_ (list range for variable credit courses)

Specify credit hours: LEC/TH \_\_\_ LAB \_\_\_ DISC \_\_\_ IS \_\_\_

Cumulative Max Total for **Variable Credit** Courses \_\_\_\_\_

Total Contact Hours (per week) \_\_\_\_\_

Specify contact hours: LEC/TH \_\_\_ LAB \_\_\_ DISC \_\_\_ IS \_\_\_

**Catalog Description of New or Revised Course:**

(if changed, type description in full; if unchanged, type "same"; limit 500 characters)

[Enter description here](#)

Prerequisite(s): [list all prerequisites here using logical operators \("and", "or" and parentheses as needed\).](#)

Level: Undergraduate \_\_\_ Graduate \_\_\_ Professional \_\_\_  
(Check all that apply)

Grade Modes: Standard \_\_\_ Pass/Fail \_\_\_ Research \_\_\_  
(Check all that apply)

Equivalent Courses: [Enter equivalent courses here](#)  
(Academically equivalent; treated as the same course in the repeat policy)

Mutually Exclusive Courses: [Enter overlapping courses here](#)  
(Not academically equivalent; but enough overlapping content that students can apply only one of these courses toward a degree)

Internship or Practicum Course (Yes/No): \_\_\_\_\_

CIP Code: [Enter CIP code here](#) if new or changing

**STATE REASON FOR REQUEST (Required by OSRHE) – For new courses, also attach Supplementary Information Form and a Syllabus.**

[Enter reason for request here - 320 character max](#)

Head of the Department – Date

Graduate College Dean (for Graduate Credit) – Date

College Dean (Department's Home College) – Date

Associate Provost – Date