**COURSE ACTION FORM (Effective 2019)**

**Requested Effective Term:** _________________________

**Initiating Department:** _______________________________

**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**

<table>
<thead>
<tr>
<th>Course Prefix/Subject</th>
<th>Course Number</th>
<th>Abbreviated Title (30 character max)</th>
<th>Full Title (if more characters needed)</th>
</tr>
</thead>
</table>

**Total Semester Credit Hours**

**Cumulative Max Total for Variable Credit Courses**

**Total Contact Hours (per week)**

**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**

<table>
<thead>
<tr>
<th>Course Prefix/Subject</th>
<th>Course Number*</th>
<th>Abbreviated Title (30 character max)</th>
<th>Full Title (if more characters needed)</th>
</tr>
</thead>
</table>

**Total Semester Credit Hours**

**Cumulative Max Total for Variable Credit Courses**

**Total Contact Hours (per week)**

**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**