REVISED FORM APPROVED BY UNIVERSITY SENATE AND SACC, MAY 2014 AND BOARD OF TRUSTEES, JUNE 2014 New Jersey City University

REQUEST FOR PERMANENT COURSE APPROVAL OR COURSE CHANGE

FULL COURSE TITLE:	
Abbreviated Course Title (30 characters maximum)	
Type of Approval Sought:	
New Course Delete from Catalog Change in Existing Course (specify change):	
Other Please specify:	
Faculty Member(s) Initiating the Course or Course Change:	
Department(s)/ Academic Unit(s) of Origin	
Student Credit/Semester Hours Prerequisite(s)	
Type of Course (check all that apply in parts 1 & 2):	
1 UNDERGRADUATE: GRADUATE:	
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2 Academic Foundations: General Education Tier:	
General Education Mode(s) of Inquiry:	
Major: Required Elective Minor: Required Elective Interdisciplinary Program: Required Elective	
Component Workload Hours: Lecture Lab Studio	
APPROVAL RECOMMENDED	
Chair, Department Curriculum Committee Date	
Chair, Department or Academic Unit Date	
Chairperson(s) Consulted, Department(s) or Academic Unit(s) Courses that cross departmental/unit lines must be submitted to other chair(s) for consultation before submitting to the dean(s)	
Chair, College Curriculum Committee Date	
Dean, College of Course Origin Date	
Chair, General Education Curriculum Committee (for General Education courses only) Date	
Chair, Senate Curriculum and Instruction Committee or Chair, Senate Graduate Studies Committee Date	
Provost Date	
COURSE NUMBER: FACULTY WORKLOAD: Number assigned by Registrar Assigned by Provost	
NOTIFICATION	
Dean, CAS Date	
Dean, COE Date	e
Dean, CPS Date	e
Dean, GS Date	e
Library Date	e
Registrar Date	e :