

EASTERN WASHINGTON UNIVERSITY
UNDERGRADUATE NEW COURSE OR COURSE REVISION PROPOSAL FORM

NEW/REVISED
COURSE

NUMBER: _____

NEW/REVISED

COURSE TITLE: _____

DEPARTMENT: _____

DATE: _____

FACULTY
CONTACT: _____

PHONE: _____

E-MAIL: _____

SECRETARY/ASSISTANT: _____

PHONE: _____

E-MAIL: _____

Department Chair: _____

Signature

Date

Dean: _____

Signature

Date

INTER-DEPARTMENT COORDINATION:

Concur

Do Not Concur

Department

Chair's Signature

Date

Concur

Do Not Concur

Department

Chair's Signature

Date

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Chair's Signature

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Department

Chair's Signature

Date

COMMITTEE, COUNCIL, AND ADMINISTRATIVE APPROVAL

General Education Coordinating Committee

(for GECD's, Capstones, etc.)

Chair's Signature

Date

Course & Program Approval Committee

Chair's Signature

Date

Undergraduate Affairs Council

Chair's Signature

Date

Academic Affairs

Signature

Date

Quarter Officially Effective: **FALL**

**EASTERN WASHINGTON UNIVERSITY
UNDERGRADUATE NEW COURSE OR COURSE REVISION PROPOSAL**

THIS PROPOSAL IS FOR A (*Check One*): New Course Revised Course Course Deletion

COURSE INFORMATION	OLD OR EXISTING COURSE	NEW OR REVISED COURSE
Course number:		
Title:		
Abbreviated Title (32 characters & spaces):		
Mode of Instruction:		
How many students allowed?		
Credit hours:		
Lecture hours/week:		
Laboratory/Practicum hours/week:		
Prerequisites (course/program/other):		
Pass/No Credit Grading for Entire Class?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)
Pass/Fail Grading for Entire Class?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)
Is course required in a major or minor?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)
Will you request a course fee for this course?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)
Is it a GEGR course?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)
Gender or Cultural Diversity?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)
International Studies?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)
Is it a Senior Capstone/Thesis course?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)
Is it a Teacher Education course?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>check one</i>)

CATALOG DESCRIPTION:

OLD OR EXISTING	NEW OR REVISED

JUSTIFICATION:

CHANGE CONTROL DOCUMENT

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End-of-Program Goals/Objectives Confirmation

1. Has the course been created or revised to address goals/objectives already stated in the department plan and assessed at end of program?

Yes No *(check one)*

2. Has the course been created or revised to enable students to achieve additional or revised goals for the program?

Yes No *(check one)*