

Course Proposal Form

- NEW COURSE:** Refer to the requirement checklist found in Appendix B.
- CHANGE** or **DELETION,** attach a statement of justification to this form.

For Change / Deletion Proposals:
<p>Indicate type of change(s) - Check all that apply: <input type="checkbox"/> Title <input type="checkbox"/> Number <input type="checkbox"/> Prerequisite(s) <input type="checkbox"/> Credit Hours <input type="checkbox"/> Description <input type="checkbox"/> Deletion <input type="checkbox"/> Other</p> <p>Type of course: <input type="checkbox"/> Required for major <input type="checkbox"/> General Education Elective <input type="checkbox"/> CED Course</p> <p>Please provide a <i>brief</i> description of the proposed change / deletion:</p> <hr style="border: 0; border-top: 1px solid black; margin-top: 10px;"/>

For New Course Proposals:
<p>Proposed Course Code _____ Course Name: _____</p> <p>Credits / Hour Breakdown: ___ Lecture Hours = ___ Credits; ___ Lab Hours = ___ Credit Hours; ___ Shop Hours = ___ Credit Hours; ___ Total Credit Hours ___ Other, please explain: _____</p> <p>Prerequisites: _____</p> <p>Associated Fees: _____</p> <p>Associated Library/AV materials: _____</p> <p>Program(s) affected: _____</p> <p><i>Please use rationale, format and responses that are consistent with college and MCCS policies. Course fees require a documented and itemized list of expenses per student and will require an application to the MCCS Board for approval. When appropriate attach current catalogue listing.</i></p>

Department Chairs and Academic Dean Signatures and Chair Initials
<p><i>Signatures of department chairs affected by this proposal and the Academic Dean must be obtained prior to submission. Signatures denote consultation only.</i></p> <p>Submitted by: _____</p> <p>_____</p> <p>Academic Dean: _____ A.C.C. Chair Initials & Date: _____</p>

Academic and Committee Chair Signature
<p><i>Signature of the Chair denotes that the proposal has been approved by the ACC.</i></p> <p>_____ _____</p> <p>Academic & Curriculum Committee Chair Date</p>

Final Approval Signature
<p>_____ _____</p> <p>WCCC President Date</p>