

## Course Change Instructions

- ✓ Please include new/revised course information in the application header, but **always** complete even if no change are being made to the title or credits.
- ✓ Do not use the & symbol in the course title. Please spell out the word (& ok for abbreviated title).
- ✓ A syllabus is required for all course change applications that are requesting one or more of the following:
  - ✓ Changing credits (e.g., 3 to 4)
  - ✓ Changing to or from CR/NC grading
  - ✓ Changing grade level (e.g., 300 to 400)
  - ✓ Adding Distance Learning
  - ✓ Making a substantial change in content
- ✓ Minimum requirements for submitted syllabus:
  - ✓ 1. Course overview and curriculum content
  - ✓ 2. Learning Goals/Objectives
  - ✓ 3. Required Texts, readings, films, websites, etc
  - ✓ 4. Evaluation and grading to include information on expectations for assignments, projects, exams, etc., should include relative % for each area.
  - ✓ 5. Course Schedule
- ✓ For information on creating a course syllabus see CIDR's "Planning the Course Syllabus": (<http://depts.washington.edu/cidrweb/Bulletin/Syllabus.html>)
- ✓ If you would like this course to be added to an approved elective list for your major, please state this in the justification.
- ✓ Additional instructions on how to fill out this form can be found online at <http://depts.washington.edu/uwcr/instructions.html>.

### **Preferred Submission Method:**

- a) 1 Original signed, single-sided application, with a syllabus and DL application if appropriate **paper-clipped** to the application. (Note: Departments in the College of Arts & Sciences submit just the original to the College).
- b) *Course changes that need a syllabus:* 7 copies, double sided, individually **stapled** once with application (remember to copy both sides) in front and the syllabus (and DL application if appropriate) behind. **1** staple per copy only please.
- c) *Course changes that do not need a syllabus:* 1 copy, double sided, individually **stapled** once with application (remember to copy both sides). **1** staple per copy only please.
- d) Either paper-clip or binder-clip the copies behind the original (no rubber bands please - ouch!)
- e) Original Memo of responsibility for any changes after the Time Schedule deadline paper-clipped to the **FRONT** of the Original application. I **DO NOT** need copies of the Memo.

\*\* Please do not group applications together. Submit each application separately paper-clipped or binder-clipped. This helps make sure an application does not get lost.

# COURSE CHANGE APPLICATION

**University of Washington  
Curriculum Review Committee**

For Office Use Only:



Prefix (new if changing,  
6 characters max.)

Number  
(new if changing)



Offered jointly with:



College or School	Department	Date
Course Title (list existing title or new title if changing)		Credits (list existing credits or new credits if changing)

**1. PURPOSE OF REQUEST (Check all that apply)**

- Permanent change, to be effective \_\_\_\_\_ Quarter 20 \_\_\_\_\_.
- Temporary change, to be effective \_\_\_\_\_ Quarter 20 \_\_\_\_\_ through \_\_\_\_\_ Quarter 20 \_\_\_\_\_.

	OLD (CURRENT) DATA	NEW DATA
<input type="checkbox"/> Change prefix and/or number		
<input type="checkbox"/> Change course title *		
<input type="checkbox"/> Change abbreviated title (19 spaces max.) *(Must be changed if changing course title, type in CAPS)		
<input type="checkbox"/> Change credits		
<input type="checkbox"/> Change prerequisites <input type="checkbox"/> Enforce prerequisite cancellation		

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Add joint status</li> <li><input type="checkbox"/> Change course description</li> <li><input type="checkbox"/> Change to permanent CR/NC only</li> <li><input type="checkbox"/> Change contact hours</li> <li><input type="checkbox"/> Drop course</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Drop joint status</li> <li><input type="checkbox"/> Change Areas of Knowledge (<u>only</u> if changing course content)</li> <li><input type="checkbox"/> Drop permanent CR/NC only</li> <li><input type="checkbox"/> Allow course to be offered with DL status (DL addendum attached)</li> </ul> |
|---|--|

*Attach a course syllabus/outline and reading list if requesting an increase in course level or credits or a substantial change in content.*

**2. JUSTIFICATION and CONTACT INFORMATION**

Explain why this change is being proposed, including its relationship to your overall curriculum and what comes before and after the course. Please list contact information for individual(s) submitting this application. (Attach additional sheet if necessary.)

Contact Name:	Phone:	Email:	Box #:
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**3. CATALOG DATA/COURSE DESCRIPTION (Complete only if changed. **Must** be double spaced.)**

Check all applicable Areas of Knowledge categories  VLPA  I&S  NW  QSR  C

(50-word limit)

Optional Catalog information (include only if you want this information listed in the *General Catalog* description):

Names and ranks of probable instructors (Include curriculum vitae for any instructor not now on the University faculty)

Quarter(s) offered (A, W, Sp, S) \_\_\_\_\_

4. CREDITS AND HOURS (Complete only if changed)

a. Contact and outside hours: 1 credit represents a total time commitment of 3 hours per week of student effort.

Contact hours per week		
Lecture _____	Laboratory _____	
Quiz section _____	Studio _____	
Seminar _____	Other* _____	
*Attach explanation and justification for "other" contact hours.		TOTAL WEEKLY CONTACT HOURS:
How many additional hours will a student be expected to spend each week in preparation for this course?		TOTAL WEEKLY OUTSIDE HOURS:
		TOTAL WEEKLY CONTACT AND OUTSIDE HOURS:

b. If variable credit, how will the number of credits awarded be related to the amount of student effort required?

c. How will students be evaluated for credit or grades? Provide specific information on assignments, projects, exams, etc. and relative % for each area.

5. STUDENTS (Complete only if changed)

a. Anticipated enrollment per quarter: \_\_\_\_\_.

b. Types of students expected (undergraduate majors, undergraduate non-majors, graduate or professional students):

6. LEARNING OBJECTIVES (Complete only if changing credits or course description)

What are the primary learning objectives for the course?

7. JOINT COURSE

List all departments, schools, or colleges participating. Joint course applications require a signature from each unit. (If units from more than one school or college participate, a separate application must be filed by each.)

Name of unit (List the unit responsible for administering the course first)	Course prefix and number	Add joint status	Drop joint status	Signature of chair/director

8. OTHER COLLEGES, SCHOOLS, OR DEPARTMENTS AFFECTED

If this course includes subject matter currently dealt with by any other University units, the originating department must circulate this application for review by those units and obtain the necessary signatures prior to submission. Failure to do so will delay action on this application.

Name of unit	Signature of dean/chair/director	Recommend approval	Recommend disapproval (attach explanation)	Date

9. APPROVAL

Date \_\_\_\_\_

Chair/Director of submitting department/unit \_\_\_\_\_

College Curriculum Committee \_\_\_\_\_

College Dean/Vice Chancellor \_\_\_\_\_