

— Course Add Proposal —
PLEASE COMPLETE THIS FORM IN RED

A guide for completing this form is located at www.admin.mtu.edu/em/faculty/courses/proposal_guide.php

1) Course Information

Is this a **half-semester course proposal**? Yes No

NOTE: All half-semester courses must follow rules set in Faculty Senate Proposal 4-00. See Senate website for details:
<http://www.sas.it.mtu.edu/usenate/propose/03/10-03.htm>

Course Prefix/Number (i.e. MEEM 2110): _____

Course Title (abbreviated; used on transcript - Up to 30 characters including spaces)

Alternative Title for Catalog (Up to 100 characters including spaces)

2) Credits

Number of credits assigned to this course _____

OR

Range of credits if variable to (Number of credits to be taken in a given semester)

3) Schedule

Contact Hours per Week (Lec & Rec: 1 credit = 1 contact hour; Lab: 1 credit = 1-3 contact hours. i.e. A 3-credit course may be 2 contact hours of lecture or recitation and up to 3 contact hours of lab OR 1 contact hour of lecture or recitation and up to 6 contact hours of lab)

Lecture

Recitation

Lab

OR

Research Course? Yes No

OR

Special Topics Course? Yes No

4) Additional Credits

May students receive **additional credits** by taking and passing this course more than once?

No

Yes, for a maximum of _____ credits. (Must be a multiple of the course credits, i.e. Research or Special Topics)

Yes, for an unlimited number of credits. (i.e. Music, Varsity sports, etc.)

5) **Pass/Fail**

Will this course be offered as a **pass/fail option ONLY**? (*grade of S or E*) Yes No

6) **Cross Listed/Equivalent Course**

Cross Listed: Is there an identical course offered in a different subject or at a different level? Yes No

If **Yes**, what is the other subject and course number? _____

Equivalent Course: Does this course replace a dropped course with no change in course content for degree requirements, prerequisites, and repeating purposes? Yes No

If **Yes**, what is the subject and course number of the dropped course? _____

7) **Corequisites and Prerequisites**

Corequisites are courses that are **REQUIRED to be taken at the SAME TIME** as this course (courses **MUST** be offered during the same term):

Required corequisite course(s): _____ _____

Prerequisites are courses that are **REQUIRED to be taken PRIOR** to enrollment in this course.
Select appropriate box and use parentheses where needed (refer to the guidebook for examples):

Required prerequisite course(s): 1 _____ <input type="checkbox"/> And or <input type="checkbox"/> Or 2 _____ <input type="checkbox"/> And or <input type="checkbox"/> Or 3 _____ <input type="checkbox"/> And or <input type="checkbox"/> Or 4 _____ <input type="checkbox"/> And or <input type="checkbox"/> Or 5 _____ <input type="checkbox"/> And or <input type="checkbox"/> Or 6 _____
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A **concurrent prerequisite** is a defined prerequisite course (from list above) that **MAY** be taken **EITHER** simultaneously in the same semester **OR** in a prior semester. Indicate below applicable courses.

Concurrent prerequisite course(s): _____ _____ _____

8) Catalog Course Description

The traditional catalog style description for this course, **up to 40 words**. If course is proposed as a half-semester course, please include that information in the description so students will see it in the printed catalog.

Please refer to the guidebook for examples and suggestions on developing a course description.

9) Registration Restrictions

- If permission is **always required** for registration purposes (a student cannot enter the course without department or instructor signature), please select the appropriate permission.

Do not select unless EVERY STUDENT must get "SIGNED INTO" the class.

Department **OR** Instructor

- Students who register for this course may be restricted by their **College/School OR** their **Major**. Please indicate if any college or major restrictions should be applied to this course. If there are no restrictions please indicate in the check box provided.

No College/School Restrictions

No Major Restrictions

Colleges/Schools who MAY NOT enroll
(EXCLUDE)

-OR-

Colleges/Schools who MAY enroll (INCLUDE)

Majors that MAY NOT enroll (EXCLUDE)

-OR-

Majors that MAY enroll (INCLUDE)

-- Restrictions continued on next page --

- A restriction may also be placed on **Class Standing** (Freshman, Sophomore, Junior, Senior, Graduate). Please indicate if any class restrictions should be applied to this course. If there are no restrictions please indicate in the check box provided.

No Class Restrictions

Class of students who MAY NOT enroll (EXCLUDE) <hr style="width: 80%; margin: 0 auto;"/> -OR- Class of students who MAY enroll (INCLUDE) <hr style="width: 80%; margin: 0 auto;"/>

10) Semester(s) Offered

Fall Spring Summer *(Check all that apply)*

OR On Demand

If offered in a specific semester, will the course be offered only in alternate years? Yes No

If yes, what will be the starting academic year? *(i.e. 2008-09 or 2009-10)* _____

11) General Education HASS Distribution

To propose this course for inclusion on a **HASS Distribution List** (HASS, HASS Creative Endeavors, or HASS Supplemental) please complete the ***New Distribution List Proposal*** form in your department's binder.

12) Co-Curricular

To propose this course for inclusion on the **Co-Curricular List** please complete the ***New Co-Curricular List Proposal*** form in your department's binder.

13) Course Computing Lab and Expendables Fees

DO NOT RECORD FEE INFORMATION HERE. Submit course fee information on the ***Course Computing Lab and Expendables Fees for New Courses*** form included in your department's binder at the end of the fee section.

14) Degree Programs which this course will affect

List the degrees, minors, and certificates in which this course will be required or used as an elective: ***

Degree Program(s):

***** Be sure to adjust the appropriate degree audits in sections 7 and 8 in your department's binder.**

15) Course Rationale *(Required)*

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16) Faculty Contact

Faculty proposing this course *(please print)*: Name _____

Email _____

**DID YOU USE RED INK TO COMPLETE THIS FORM?
IF NOT, PLEASE HIGHLIGHT YOUR ANSWERS SO NOTHING IS MISSED IN PROCESSING.**