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| * This form must be completed to request the addition of a new course * Incomplete requests will not be processed – Please complete all fields in Section 1 and join required documents (e.g., Justification of CE) * The approval of the Vice President for Academic Affairs is a prerequisite for the addition of a new course * A detailed master syllabus and updated curriculum map must be joined with this form * Upon approval of the request, make sure that the course is added in Banner and that the OAS is updated accordingly |
| **Section 1: Requester (Complete 1 to 14)** |
| * **The College:** * **The Department:**  \_\_\_\_ * **The Program/Major:**  \_\_\_ \_ * **Contact Person:**  \_\_\_\_\_\_ **Proposed Effective Term:**  \_\_\_ \_ * **Proposed Catalog Terms:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Course Subject, Number and Language of Instruction:**  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **Example:** | **E** | **N** | **G** | **L** | **1** | **0** | **0** | | **Requested Course** |  |  |  |  |  |  |  |   **Specify Language of Instruction**  **for Course:** Select From List     1. **Course Title (English-***must not exceed 30 characters***)**: 2. **Course Title (Arabic -***must not exceed 30 characters***)**: 3. **Credit Hours**:  **Sequence Offering:** Select From List 4. **Lecture Contact Hours**:  **Lab Contact Hours (if Any)**: 5. **Course Package**: Select From List 6. **Course Level:** Select From List 7. **Grade Mode:** Select From List 8. **Course Designation:** Select From List 9. **Is this course associated with another credit bearing course (lecture and associated laboratory courses)?**   Select From List (If Yes, Associated Course Subject and Number: )  **NOTE:** **A Separate form should be submitted for adding associated Lecture/Lab Course, if needed.** |
| 1. **Course Catalogue Description (***English and Arabic,**must not exceed 80 words* \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ |
| 1. **Does this course have any registration restrictions?** Select From List (If Yes, Please provide restriction details in the table below )  |  |  |  | | --- | --- | --- | |  | **College** | Include / Exclude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | **Major** | Include / Exclude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | **Level** | Include / Exclude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | **Campus** | Include / Exclude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | **Class** | Include / Exclude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | **Degree** | Include / Exclude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | **Program** | Include / Exclude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 1. **Course Prerequisites / Co-requisites / Equivalencies (if any):**  |  |  |  | | --- | --- | --- | | **Prerequisites (If Any)** | **Co-Requisites (If Any)** | **Equivalencies (if Any)** | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 1. **Date of Submission to Department / Program Curriculum Committee:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   **NOTE:** **Completed form must first be forwarded to the Department / Program Curriculum Committee** |

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| **Section 2**: **Department / Program Curriculum Committee** |
| 1. **Does the proposed addition of the new course have any impact on other programs or enrolled students?**   **NO** (Go to Item 3 below)   **YES** (If Yes, Complete Table below)   |  |  | | --- | --- | | **List of Impacted Programs (If Any)** | **Number and Type of Impacted Students** | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  1. **Measures to resolve impact related Issues:**  \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ |
| 1. **The Department / Program Curriculum Committee’s Recommendation**   **Approve**  **Conditional Approval**  **Reject**  **Comments (if any):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date of Submission to Department Head / Program Director:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Section 3: Department Head / Program Director** |
| **The Department Head’s / Program Director's Decision:**  **Approve**  **Reject**  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Section 4: College Curriculum Committee** |
| **The College Curriculum Committee’s Recommendations:**  **Approve**  **Conditional Approval**  **Reject**  **Comments (if any):** \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ \_  **Date of Submission to College Dean:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Section 5: College Dean** |
| **The College Deans’ Decision:**  **Approve**  **Reject**  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Section 6: University Curriculum Committee** |
| **The University Curriculum Committee’s Recommendation:**  **Approve**  **Conditional Approval**  **Reject**  **Comments (if any):** \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ \_  **Date of Submission to VP&CAO:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Section 7: Vice President for Academic Affairs** |
| **The Vice President for Academic Affairs’ Decision:**  **Approve**  **Reject**  **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |