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| **/Users/mschmidt/Documents/*V State Logos/West Hall Logos/VSU West Hall Logo.jpg** | **Valdosta State University Curriculum Form**   * **Request for a REVISED COURSE** | | | | | | | **Date of Submission:** | | *Select Date.* |
| *\*Course/curriculum revisions originate with a faculty member or curriculum committee in the Academic Program.* | | | | | | | | | | |
| **College:** | | *Select One.* | | | | | **Dept. Initiating Request:** | | |  |
| **Requestor’s Name:** | |  | | | | | **Requestor’s Role:** | | | *Select One.* |
|  | | | | | | |  | | | |
| **CURRENT:** | | | | | | **REQUESTED:** *(list only items to be changed)* | | | | |
| **Course Prefix**  **and Number:** | |  | | | | **Course Prefix and Number:** | | |  | |
| **Course Title:** | |  | | | | **Course Title:** | | |  | |
| *Lecture Hours:* | |  | | | | *Lecture Hours:* | | |  | |
| *Lab/Contact Hours:* | |  | | | | *Lab/Contact Hours:* | | |  | |
| *Credit Hours:* | |  | | | | *Credit Hours:* | | |  | |
| **Pre-requisites:** | |  | | | | **Pre-requisites:** | | |  | |
| **CURRENT Course Description:** | | | | | | **NEW Course Description:** [*(hover over for instructions)*](#_top) | | | | |
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|  | | | | | | | | | | |
| **Program Level:** | | | **Course Classification:** | **Semester to be Effective:** | | | **Year to be Effective:** | | | **Estimated Frequency of Course Offering:** |
| Undergraduate  Graduate | | | Core (Area A-E)  Major Requirement  Elective | Fall  Spring  Summer | | |  | | | *Select One.* |
| **Justification:** *(select one or more of the following and provide appropriate narrative below:)* | | | | | | | | | | |
| Improving student learning outcomes  Adopting current best practice(s) in field | | | | | Mandate of State/Federal/Accrediting Agency  Other – | | | | | |
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| **Source of Data to Support Change** *(select one or more of the following):*  Indirect Measures; SOIs, student/employer/alumni surveys, etc.  Direct Measures; Materials collected/evaluated for program assessment (tests/portfolios/assignments, etc.) |
| **Plans for assessing course effectiveness/meeting program learning outcomes**  *(select one or more of the following and provide appropriate narrative below):*  Indirect Measures; SOIs, student/employer/alumni surveys, etc.  Direct Measures; Materials collected/evaluated for program assessment (tests/portfolios/assignments, etc.)  Other Data Source Descriptions – |
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| **/Users/mschmidt/Documents/*V State Logos/West Hall Logos/VSU West Hall Logo.jpg** | **Valdosta State University - REVISED COURSE Form**   * **Request for a REVISED COURSE** | | | | | |
| **Approvals:** | | | **Print:** | **Signature:** | | **Date:** |
| Department Head | | |  |  | |  |
| College/Division Executive Committee | | |  |  | |  |
| Dean/Director | | |  |  | |  |
| Graduate Executive Committee (for graduate course) | | |  |  | |  |
| Graduate Dean (for graduate course) | | |  |  | |  |
| Academic Committee | | |  |  | |  |
|  | | | | | | |
| **\*Will this change impact another college/department?** | | | | No  Yes *[select college & indicate department(s)]* | | |
| **College:** | | *Select One.* | | **Department(s):** |  | |