

APPLICATION FOR PROPOSED NEW COURSE

Submitted by:

Date:

Full Title of Proposed Course:

Abbreviated Course Title, if applicable (cannot exceed 30 characters including spaces. Do not use the '&' or '/' symbols when creating titles, hyphens are OK):

Course will be added to the EGSC Course Schedule effective (Term/Year):

Suggested Course Number (use table below to determine):

Course Level:

Area(s) for Course Use:

Course Number	Description
0000-0999	These are pre-requisite Learning Support courses. Students must earn a "C" grade or higher in corequisite course to exempt and enroll in credit-bearing courses.
1000-1999	Introductory courses that are open to first-year students. These courses do not have prerequisites.
2000-2999	These courses are designed, primarily, for sophomores, juniors, and seniors. First-year students may enroll if they have completed the appropriate prerequisite courses.
3000-3999	These courses are generally designed for juniors and seniors who are currently in their major area of study.
4000-4999	These courses are designed for seniors who require focused courses in their major area of study.

Hours Per Week Lecture:

Hours Per Week Lab:

Total Credit Hours:

Prerequisites:

Estimated Enrollment (Headcount) Per Term Offered:

Available Texts:

Approximate Cost of Text: \$

Chair or Coordinator Signature:

Justification for the Course (narrative):

Course Description:

Estimated Budget to Support This Course:

A) Operating Costs:

B) Capital Outlay:

C) Additional Library Resources:

Institutions in the USG Offering Similar Courses (include course titles and numbers):

Course Syllabus (attach a reasonably complete outline of the main points of the course):

Major Topics to be Covered (weekly):

Objectives of the Course:

Will the course replace another, or is this an additional course?

What effect will this course have on the enrollment in other courses?

Institutional Resources Which Make the Offering Desirable (including qualifications of available instructors):

**ROUTING FORM FOR PROPOSED CHANGES TO ACADEMIC POLICY, CURRICULUM CHANGES, STATUTES
EAST GEORGIA STATE COLLEGE**

NAME OF POLICY/ PROPOSAL: Application for Proposed New Course Form

Attach a complete copy of the proposed change as acted upon by the APCC or Faculty Senate. If changes made to proposal prior to adopting, please note the person and governance body making the change on the proposal, initial and date the change. Copies of appropriate documentation should be attached to the form with each submission and should be retained at each level. Please indicate the type of proposal being submitted:

- | | | |
|--|--|---|
| <input type="checkbox"/> New Course | <input type="checkbox"/> New Degree Program | <input type="checkbox"/> Changes to Degree Program Requirements |
| <input type="checkbox"/> Deactivate Course | <input type="checkbox"/> Discontinue Course | <input type="checkbox"/> Reactivate Course |
| <input type="checkbox"/> Discontinue Course | <input type="checkbox"/> Deactivate Degree Program | <input type="checkbox"/> Discontinue Degree Program |
| <input type="checkbox"/> Reactivate Degree Program | | <input type="checkbox"/> Statutes Revision |
| <input type="checkbox"/> Policy Proposal. | <input type="checkbox"/> Policy Revision | <input type="checkbox"/> Other: _____ |

ACADEMIC POLICIES AND CURRICULUM COMMITTEE (APCC)

Initiated and Submitted to APCC

Signature _____ Date _____

Dean Approval:

Signature _____ Date _____

APCC Action: Approved Denied Returned Tabled
Sandra Shuman _____ 9.18.2020
 Signature of Vice President for Academic and Student Affairs, Chair Date

Comments: _____

APCC Chair submits to Faculty Senate

FACULTY SENATE

Faculty Senate Action: Approved Denied Returned Tabled
Aura Chamber _____ 10-8-20
 Signature of Faculty Senate President Date

Comments: _____

Faculty Senate President sends to EGSC President and to the Vice President for Academic and Student Affairs
Note: Revisions to EGSC Statutes require approval of President's Cabinet and must be submitted to Chief of Staff/Legal Counsel for routing to President's Cabinet and routing to President. Please indicate "EGSC Statutes revision" on this form.

President's (or designee's) Action: Approved Denied Returned Tabled
Robert _____ 10-09-2020
 Signature Date
 Comments: _____

Distribution By: _____
Megan _____ 10/12/20
 Signature Date

President retains original ACADEMIC POLICY/PROPOSAL ROUTING FORM

President's Office Distributes Copies To:

Faculty Senate—President	Date <u>10/12/20</u>
Academic Policies & Curriculum Committee—Chair/VPASA	Date <u>10/12/20</u>
Chief of Staff/Legal Counsel	Date <u>10/12/20</u>