Summer 2020 Course Proposal Form



Please complete one form for each new course you would like to propose for Summer Session 2020.

Course information:			
Course Subject Code:	Course Number: Course	e Title:	
Shared resource/cross list: Ye	es No (circle one) If yes, what is the other cou	urse?	
	Options (please note: schedule types and attributes a	are generally brought into Banner from the catalog automatically	
AVAILABLE ENROLLMENT CAPS	AVAILABLE SESSION/TERMS	AVAILABLE DELIVERY METHODS	AVAILABLE SCHEDULE RESTRICTIONS
Standard (Lecture 25) (Ind. Study 3) 28 (over-enrollment) Other (specify number and provide justification):	Full Session (May 20 – August 3) Session I (May 20 - June 24) Term A (May 20 - June 8) Term B (June 9 - June 24) Session II (June 29 – August 3) Term C (June 29 - July 14) Term D (July 15 – August 3) Other dates, please specify: NOTE: Classes should NOT be held on May 25 or July	Online Hybrid** (consistent online/in-class schedule – ex: M/W online & T/R on-campus for the duration of the session/term) Blended** (sporadic online/in-class schedule – ex: almost all online with a testing day on-campus a few times during the session/term) On-Campus** **For on-campus meetings**	Open to all students Special permission Majors only (list majors to be included) Non-Majors only (list majors to be excluded) ADDITIONAL OPTIONS
	3.	Desired Building: Desired Room(s): Region Time:	Prerequisites (list)
AVAILABLE CREDIT HOURS 0	INSTRUCTOR	Days: MTWR(<i>circle all that apply</i>) or specify dates below	Attributes (list)
$ -\frac{1}{2} $	Instructor first and last name:	(blended)	Schedule Type (list)
3 4 5	Instructor C#: C00		
other, please specify:	Has instructor taught an online course before? Yes/No (circle one)		

Other instructor/department notes/questions/comments:

See reverse for signatures

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Course Fees (if applicable) (Beyond Standard Tuition and Fees).	Yes	No Fee Amount:

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No

Has your fee been approved? Yes

NOTE: it is your responsibility to be sure that any proposed fees have been submitted to the Business Office for the proper approval. For questic please feel free to contact our office and we will be happy to assist you.	ns on the process,
please reel free to contact our office and we will be happy to assist you.	
Signature and notes	Date
Instructor	
Chair	
Dean	
Director of Extended Learning	
Extended Learning Office Use Only: Course Reference Number (CRN): Section Number: Date Built:	