

Please consult the [Curriculum Change Guide](#) prior to completing this form.
Upon completion, submit to your department curriculum committee chair.
If you need assistance, please contact the Academic Affairs Office at ext. 2206.

Signature and Routing

All signatures contained herein indicate recommendation of the course alteration being proposed. This course may not move forward until approval is received by SUNY System and the State Education Department (when appropriate).

REQUIRED SIGNATURES:

DATE

Department Curriculum Committee Chair: _____	_____
Department Chair/Coordinator: _____	_____
School Curriculum Committee Chair: _____	_____
School Dean: _____	_____
CCRC Chair (if undergraduate): _____	_____
GFEC Chair (if graduate): _____	_____
TEC Curriculum Chair (if applicable): _____	_____
Provost: _____	_____

Complete all fields within this document and attach documents as required.

SECTION I

Department: _____ Subject Prefix: _____ Number Prefix: _____

Existing Course Title: _____

Select changes being requested:

Prefix and/or Number: _____

Change Existing **Frequency Code**: from _____ to _____

Change Existing Credit Hours: from _____ to _____

Change Existing Title to: _____


Provide abbreviated course title (limit to 30 char.)

(Please attach course outline)

Corequisite/Prerequisite Change:

Change Existing Catalog Description:

a. Existing Course Description:

b. New Course Description: (click icon to see example) 

Provide explanation to any changes checked above:

SECTION II

1. Does this alteration have an effect on any of the attributes of this course:

General Education	Yes	No
Liberal Arts	Yes	No
Presentation Skills	Yes	No
Writing Intensive	Yes	No

2. If you selected yes to any of the above, provide explanation: (use additional sheets if needed)

3. Is this course used by any other departments as part of a program? Yes No

If yes, check any that apply and attach comments by these departments regarding the impact of the course alteration.


Course Prerequisite/Corequisite

Shared Resources

Cross-listed Course. Please specify cross-listed course:



Other (*please explain*):

4. Is this course alteration part of a teacher education program?  Yes No

If yes, attach a course syllabus using the TEC Course Syllabus Template.