





# COURSE CATALOG FORM

PLEASE COMPLETE THIS FORM TO PROPOSE A NEW COURSE OR TO CHANGE TO AN EXISTING COURSE.

SUBJECT CODE: \_\_\_\_\_ COURSE NUMBER: \_\_\_\_\_

**PRE-REQUISITES:** A COURSE(S) THAT **MUST** HAVE BEEN SUCCESSFULLY COMPLETED IN A **PRIOR SEMESTER**. **PRE-REQUISITE WITH \*CONCURRENCY** IS A COURSE THAT **MAY** BE TAKEN WITHIN THE **SAME SEMESTER OR IN A PRIOR SEMESTER**.

SUBJECT	COURSE NUMBER	MINIMUM GRADE	AND / OR		CONCURRENCY *	
			AND	OR	YES	NO
_____	_____	_____	AND	OR	YES	NO
_____	_____	_____	AND	OR	YES	NO
_____	_____	_____	AND	OR	YES	NO
_____	_____	_____	AND	OR	YES	NO

LIST ADDITIONAL PRE-REQUISITES NOT CAPTURED ABOVE BY COURSE FIELDS (EXAMPLE: HIGH SCHOOL EQUIVALENT WORK)

PRE-REQUISITES: \_\_\_\_\_

**CO-REQUISITES:** A COURSE THAT MUST BE TAKEN WITHIN THE SAME SEMESTER

SUBJECT	COURSE NUMBER
_____	_____
_____	_____
_____	_____
_____	_____

**EQUIVALENCIES:** LIST ALL COURSES THAT ARE EQUIVALENT TO THE NEW OR CHANGED COURSE

SUBJECT	COURSE NUMBER
_____	_____
_____	_____
_____	_____
_____	_____

**COURSE RESTRICTIONS:** PLEASE INDICATE SPECIFIC RESTRICTIONS. (EX: COLLEGE RESTRICTION: AE, AS, BU, ED, AND HP)

- TERM \_\_\_\_\_
- CAMPUS \_\_\_\_\_
- COLLEGE \_\_\_\_\_
- MAJOR \_\_\_\_\_
- LEVEL \_\_\_\_\_
- CLASSIFICATION \_\_\_\_\_
- DEGREE \_\_\_\_\_
- PROGRAM \_\_\_\_\_

COURSE DESCRIPTION: \_\_\_\_\_



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COURSE RATIONALE: \_\_\_\_\_

LEARNING OBJECTIVES: (FOR EACH LEARNING OUTCOME, INDICATE ON THE SYLLABUS HOW IT WILL BE ASSESSED)

REQUIRED MATERIALS: \_\_\_\_\_

TECHNICAL REQUIREMENTS: \_\_\_\_\_



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CHAIRPERSON SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ASSOCIATE DEAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

COLLEGE/SCHOOL CURRICULUM COMMITTEE: \_\_\_\_\_ DATE: \_\_\_\_\_

**APPROVED FOR SCHEDULE AND COURSE CATALOG BY THE DEANS' COUNCIL**

DYSON COLLEGE OF ARTS AND SCIENCES: \_\_\_\_\_ DATE: \_\_\_\_\_

LUBIN SCHOOL OF BUSINESS: \_\_\_\_\_ DATE: \_\_\_\_\_

SEIDENBERG SCHOOL OF COMPUTER SCIENCE: \_\_\_\_\_ DATE: \_\_\_\_\_

SCHOOL OF EDUCATION: \_\_\_\_\_ DATE: \_\_\_\_\_

COLLEGE OF HEALTH PROFESSIONS: \_\_\_\_\_ DATE: \_\_\_\_\_

LAW SCHOOL: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*FACULTY COUNCIL COMMITTEE NEW YORK:** \_\_\_\_\_ DATE: \_\_\_\_\_

**\*FACULTY COUNCIL COMMITTEE PLEASANTVILLE:** \_\_\_\_\_ DATE: \_\_\_\_\_

PROVOST SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*ONLY REQUIRED IF CHANGES IN COURSE OFFERING CAUSES SIGNIFICANT CHANGE IN THE REQUIREMENTS OF AN EXISTING PROGRAM.**