**Attachment 4**

**Course Action Request Form**

**Tennessee State University**

**Nashville, Tennessee**

Department \_Click here to enter text.\_\_ School/College/Institute \_\_Click here to enter text.\_\_

PROPOSAL TO:

Establish a New Course

Discontinue a Course

Change Number/Title of a Course

Change Course Description or Prerequisites

Change Course Credit Hours

Establish Alternative Delivery System

Cross Listing of a Course

Proposed Semester Change Date for Requested Action\_\_\_\_\_\_\_\_\_

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Present Course Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Course No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Credit Hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposed Course Title: (list SAME if no changes)\_\_\_\_\_\_\_\_\_\_

Proposed Course No.: (list SAME if no changes) \_\_\_\_\_\_\_\_\_\_

Proposed Credit Hours: (list SAME if no changes)\_\_\_\_\_\_\_\_\_\_\_

Effective Term of Action: ( Semester and Year): \_\_\_\_\_\_\_\_\_\_\_\_\_

Classification of Instructional Programs Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Ceiling Limit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grading Scheme \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organizational Responsibility\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Funding Source\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructional Medium/ Media\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Weekly Contact Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rationale for Change

Catalog Descriptions (Including prerequisites):

* Present Catalog Description (including credit hours, prerequisites):
* Proposed Catalog Description (including credit hours, prerequisites):

(list NO CHANGES if no changes in description written above)

**Further Information Required**

* **If Establishing a New course**:

- Indicate the projected enrollment in the course, justify the course in terms of student need, and the relationship to other courses in the departmental curricula (core, major, elective, etc. ) and to the total educational curricula of the university;

- If a comparable course is offered in another unit, justify any duplication;

- Will the course be adding hours or substituting hours in a curriculum?

* **For changes in existing courses**, indicate how the change will affect the departmental curriculum and/or the total educational curricula of the university.
* **For Dual listed (undergraduate/graduate courses,)** course outline must demonstrate a substantial difference between undergraduate and graduate components, and just ensure appropriate attention to both groups. Graduate study must be at a level of complexity and specialization that extends the knowledge and intellectual maturity of the student, must require graduate students to analyze, explore, question, reconsider and synthesize old and new knowledge and skill (SACSCOC 2012- 4.3.4)

**Special Features**

* List programs presently being offered for which this course will be used to meet requirements
* Provide a list of faculty members who may teach the course and their qualifications.
* Discuss any special physical facilities needed to support the proposed new course, such as laboratories, teaching and research equipment, seminar room etc.
* If the course is in an area in which professional certification is advisable, explain how the course will contribute to certification.
* Projected new costs associated with the course, including facilities, faculty, library, research and teaching supplies, travel expenses, technical assistance, or other related expenses.

Note: Attach a Course Outline including the general and specific **objectives**, clinical or experiential **components** outline of **course topics**, **activities** required of students, **evaluation** procedures.

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| **CARF Approvals**  Dept. Curriculum  & Instruction Committee: |  |  |  |
| Department Chair: | Chair |  | Date |
| College Dean: | Chair |  | Date |
| Faculty Senate Curriculum  & Instruction Committee (for undergraduate courses) | Dean |  | Date |
| Graduate Council  (For graduate courses only) | Chair |  | Date |
|  | Chair |  | Date |
| Final Approval: |  |  |  |
|  | Vice President for  Academic Affairs |  | Date |

Copies of final approved document go to College Dean, Registrar and Dean of the Graduate School for information and dissemination into the Banner System.

ACTION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature Date

**Approved VPAA- December 2018**