

Integrity @ Leadership @ Tradition @ Civility @ Excellence @ Service

| Proposal No. |                             |
|--------------|-----------------------------|
| -            | Curriculum Committee Chair) |

**Instructions:** Courses may be proposed by any faculty member but should be done in consultation with peer faculty as necessary. Once the course proposal has been completed, it should be submitted to the department head for approval. If approved by the department head, the proposal will be forwarded to the chair of the Curriculum Committee for further review.

## **COURSE PROPOSAL FORM**

| 1. | Submitted by: ( ) ACCT/FINC/ECON ( ) MGMT ( ) MKTG/CIS ( ) Other |  |
|----|--|--|
| 2. | Course Title:  |  |
|    | ( ) Change:  |  |
|    | ( ) Add a new course   |  |
|    | <ul><li>( ) Delete a course</li><li>( ) Other</li></ul>          |  |
| _  |  |  |
| 3. | Requested effective Change date: Prefix (Current and Proposed):  |  |
|    | Course Number (Current and Proposed):                            |  |
|    | Title (Current and Proposed):                                    |  |
|    | Course Description (Current and Proposed):                       |  |
|    | Credit Hours (Current and Proposed):                             |  |
|    | Lecture Hours/week:  |  |
|    | Lab Hours/week:  |  |
|    | Specify any fees associated with a Lab:                          |  |
|    | Justification for fee:   |  |

| Committee/Task Force | Members: | Recent Notes:                                |            |
|----------------------|----------|--|------------|
| Dean's Office        |          | 2019-03-07: Formatting updated and posted to |            |
|                      |          | COBA website                                 |            |
| Date Approved:       |          | Effective Date:                              | 2019-03-07 |
| Version:             | 1        |  |            |

| 4. | Justifications for the proposal.   |
|----|--|
| 5. | Are there other areas/programs within the University affected by this proposal?  ( ) Yes. Please answer questions below.  ( ) No. Please go to question # 6. |
|    | a. Identify the areas/programs and explain how they are affected.  |
|    | b. Has the Dean or Department Head of all areas/programs affected by the proposed curriculum been contacted? Who has been contacted and when?                |
| 6  | <ul><li>Is this course a Writing Intensive Course?</li><li>( ) Yes. Please answer questions below.</li><li>( ) No. Please go to question # 7.</li></ul>      |
|    | a. Describe what characteristics of this course that make it a writing intensive course.   |
|    | b. What academic program will use this course to fulfill Writing Intensive requirements?   |
|    | c. What majors require this course?  |
| 7. | Is this course a General Education Designation? Justification:   |
| 8. | Will the approval of this course result in a net increase in the course inventory for the department?  ( ) Yes. ( ) No.                                      |
| 9. | Is it expected that the approval of this course will result in an increase in overall course offering per semester?  ( ) Yes. ( ) No.                        |
| 10 | <ul><li>Can the course be offered by present faculty?</li><li>( ) Yes.</li><li>( ) No.</li></ul>   |
| 11 | . Will the course require special equipment/ facilities/ library materials not currently available?  ( ) Yes. Please explain:                                |
|    | ( ) No.  |
|    | Office of the Dean College of Business Administration  |

Prerequisites (Current and Proposed):

| 12. Signature:                                     | Date:                            |
|--|----------------------------------|
|  |                                  |
| Recommendation:                                    |                                  |
| Teaching Delivery: (Check all that apply):         |                                  |
| Face-to-faceOn-lin                                 | e Hybrid                         |
| Maximum size of Class:                             |                                  |
| Would someone from the Dept. like to represent the | Course Change at COBA Curriculum |
| Comm.? YesNo                                       | _                                |
|  |                                  |
| ***** Please Attach a Master Co                    | urse Syllabus *****              |

| Vote results:                                     |
|---|
| Yes:<br>No:                                       |
|   |
| Chair CC Date:                                    |
| Yes:<br>No:                                       |
| Date:   |
| nistration*<br>osal is going forward without COBA |
|   |