**COURSE REVISION FORM**

Effective term:

# Effective term: Undergraduate or Graduate course?

**Course subject**: **Current course number**: **Current Cross Listing(s)**:

**Current Course Title:**

# PART I: CORE STATUS

**Is this course currently included in the CU Denver Core Curriculum?** (Y/N)

**Revisions to CU Denver Core Curriculum courses must first be approved by the Core Curriculum Oversight Committee (CCOC).** Departments are responsible for communicating with the CCOC regarding these revisions, and should contact the chair of the CCOC to obtain CCOC approval. Please attach documentation of CCOC communication and approval to this course revision form.

**If this form is proposing the revision of a current CU Denver Core course, please attach documentation, and initial here to signify that this course revision has been communicated to the CCOC:**

**OR**

**Are you proposing to add this course to the CU Denver Core Curriculum?**  (Y/N)

**Additions to the CU Denver Core Curriculum must be reviewed and approved by the CCOC after approval by the EPCC.** Departments are responsible for proposals to the CCOC, and should consult the website of the Office of Undergraduate Experiences for guidelines and deadlines for CCOC proposal submissions. The addition of an existing course to the CU Denver Core Curriculum requires a new course number, so please include the desired number revision in Part II below. *Once a course has been approved by both the EPCC and the CCOC for inclusion in the Core, department chairs must work with the course coordinators in the CLAS Dean’s Office to ensure that the new course’s core status is made effective in the catalog and course inventory.*

# PART II: REVISIONS

# *Please complete all sections of Part II that pertain to the revisions that you are proposing.*

 Number Revision Proposed New Course Number:

 Title Revision Proposed New Course Title:

*The official title should be no more than 30 characters, including spaces. These official titles appear on the official student record. If a title is longer than 30 characters, please indicate how you would like it to be abbreviated to appear on an official record.*

 Description Revision

Current Description:

Proposed New Course Description:

 Units of Credit Revision

Current Units of Credit: Proposed New Units of Credit:

 **Repeatability Revision**

Current Repeatability Rule:

Proposed New Repeatability Rule:

If the course may be repeated and have the additional hours counted toward a degree, please indicate the maximum number of credits that students can take that will count toward a degree:

 **Cross Listing Revision**

*Please attach a memo indicating approval for any new cross-lists that involve courses outside your department.*

If you are adding a cross list, please specify:

If you are removing a cross list, please specify:

 **Other**

Please specify:

# PART III: RATIONALE

**Why should this course be revised? What is the impact on degree structure/ academic unit? Will the revision change demand for the course? Is there any other information that will help the committee understand the need for this revision?**

# PART IV: COURSE SYLLABUS

**IF you are proposing to add a graduate/undergraduate level cross-list, or if you are proposing to add a cross-list with a course that doesn’t already exist, please attach a sample syllabus that clearly outlines:**

* Key learning outcomes for students and level of rigor
* Principal topics covered in this course
* Required readings (including books, journal articles and other sources)
* Types of work required of students, indicating the relative importance of each type of assignment in determining students’ grades
* Various types of work and assignments required for the different levels, and differentiated expectations for each level

# PART V: APPROVALS

Was this course revision reviewed and approved by your department’s curriculum committee?

Prepared by: Date:

Department Chair: Date: