

University of New Hampshire Course Approval Form

Check One:

ADD **DELETE**

EFFECTIVE BEGINNING

FALL
 SPRING
 SUMMER

Change Course # From To

Course additions, deletions, or changes for the university course catalog.

YEAR

Reuse Course #
Course numbers cannot be reused for a minimum of four years

COLLEGE SUBJECT COURSE NUMBER

Reactivate *previously deleted*

MODIFY Reason for modification

Course Catalog Title:

Abbreviated Title:

Banner only accepts 30 characters including spaces (i.e. ONLY 30 characters including spaces will print on a student's transcript).

Previous Title:
If modifying title

Check all that apply:

- Permission Required** (for all students)
- Tuition Waived** (Students pay only program fee)
- Course may be repeated for credit** up to a maximum of credits
- IA Course** (requires continuous grading)
Number of times student registers

Credit Hours

Enter credits in box or if variable fill in below

TO
 OR

Grading Mode (Check one)

- Credit/Fail** (CR/F appears on final grade roster)
- Letter Grade**

Special Fee **Yes** **No**

Delete **Add**

Amount:

For Special fee additions and/or changes you must attach a "Special Fee Form" providing account information.

DISCOVERY Yes No
Please attach Discovery Program Course Approval Form.

WRITING INTENSIVE: Yes No
Discovery
For WI designation, please attach a WI approval form.

Schedule Type Lecture Lab Lecture/Lab Seminar Exchange/Abroad Tutorial Media Learning
 Clinical Studio Performance Internship Independent Study Thesis/Dissertation

Restrictions

<p>CLASS</p> <p><input type="checkbox"/> INCLUDE <input type="checkbox"/> EXCLUDE</p> <p><input type="checkbox"/> FR <input type="checkbox"/> SO <input type="checkbox"/> JR <input type="checkbox"/> SR</p>	<p>COLLEGE</p> <p><input type="checkbox"/> INCLUDE <input type="checkbox"/> EXCLUDE</p> <p><input type="checkbox"/> COLSA <input type="checkbox"/> COLA <input type="checkbox"/> CEPS <input type="checkbox"/> GRAD <input type="checkbox"/> TSAS <input type="checkbox"/> WSBE <input type="checkbox"/> DCE <input type="checkbox"/> SHHS</p>	<p>MAJOR</p> <p><input type="checkbox"/> INCLUDE <input type="checkbox"/> EXCLUDE</p> <p><input style="width: 100%;" type="text"/></p>
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PREREQUISITES: **COREQUISITES:**

PRE- OR CO-REQUISITE:

EQUIVALENT COURSES

CROSS-LISTED WITH (Also listed as)

A) Human Biological Materials (e.g. blood)

B) Radioactive Materials

Yes **No**

Yes **No**

NOTE: Additions/Changes/Deletions in Discovery Program or Writing Intensive status cannot be made using this form.
For more information go to UNH Discovery Program website

Please attach a concise course description for the course catalog(s) and/or explanation of modifications.

Department Chairperson

Date

Approve Deny

Dean of Graduate School

Date

Approve Deny

Dean of College

Date

Approve Deny

Faculty Director, Discovery Program

Date

Approve Deny

Vice President for Academic Affairs

Date

Approve Deny

Received in Registrar's Office

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DP Office 6/2009