

UNIVERSITY OF NEW HAMPSHIRE

EFFECTIVE BEGINNING YEAR

Course Approval Form

Course additions, deletions, or changes to the University course catalogs.

Select one

Select a College or Program

Dept

Subject

Course #

Select one:

Change Course Number

FROM

TO

Cannot reuse for a minimum of four years

Reason for Modification

Course Catalog Title

Abbreviated Title

30 characters maximum 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 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 on)

Credit/Fail (CR/F appears on final grade roster)

Letter Grade

Special Fee

Amount

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

Schedule Type

Lecture

Lab

Lecture/Lab

Exchange/Abroad

Media Learning

Thesis/Dissertation

Studio

Performing groups

Performance

Independent Study

Internship, Clinical, Supervised Learning

Recitation, Discussion

Restrictions

CLASS Include Exclude

COLLEGE Include Exclude

MAJOR Include Exclude

FR SO JR SR

COLSA COLA CEPS GRAD

TSAS PAUL DCE HHS UNHM

RO Only Key Words

EFFECTIVE BEGINNING

PREREQUISITES:

COREQUISITES:

PRE- OR CO-REQUISITES:

EQUIVALENT COURSES (no credit if earned for

CROSS-LISTED WITH (also listed as)

Will your course involve handling of

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

Yes No

B) Radioactive Materials

Yes No

CAF34

University of New Hampshire Course Approval Form

Course additions, deletions, or changes to the University course catalogs.

Select a College or Program Dept Subject Course #

DISCOVERY Yes No

Please attach Discovery Program Course Approval Form.

WRITING INTENSIVE Yes No

For WI designation, please attach a WI proposal form.

Major Requirement Yes No

Minor Requirement Yes No

A concise course description (75 words or less) for the course catalogs and/or explanation of modifications

Department Chairperson Approve Deny _____ Date

Associate Dean of College Approve Deny _____ Date

Faculty Director, Discovery Program Approve Deny _____ Date

Dean of Graduate School Approve Deny _____ Date
(800-level and above or combination undergraduate/graduate)

Vice President for Academic Affairs Approve Deny _____ Date

Thompson School of Applied Science Signatures

Director of Thompson School Approve Deny _____ Date

TSAS Curriculum Committee Approval Approve Deny _____ Date

University of New Hampshire at Manchester Signatures

Submitted by Faculty Member Approve Deny _____ Date

Department Chair Approve Deny _____ Date

Chair Academic Resources and Curriculum Committee Approve Deny _____ Date

Dean of University of New Hampshire at Manchester Approve Deny _____ Date

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