



**DIRECTIONS:** (Detailed instructions for completing this form are available on the Official Publications website)

**IMPORTANT:** If viewing in browser, please **download form before using**. For best performance use Adobe Acrobat (available as a free download from eRaider), or Reader XI. Use this form when adding a course, deleting a course, or making substantive changes (i.e. activity type, course prefix or number, title, etc.) to an existing course. Fields marked with an asterisk are required to be completed. **Section 1** includes information about the course, and all fields **MUST** be completed prior to form submission. Complete **Section 2** if adding a course, **Section 3** if changing a course in any fashion, or **Section 4** if deleting a course. **Final approver should submit for processing by clicking button on page 2, which appears after college-level signature is applied.** (Note: Syllabus must be attached to form prior to application of initial electronic signature; once signed the form cannot be modified.) Prerequisite changes should be made online at: [www.depts.ttu.edu/registrar/private/CrsInventory/default.aspx](http://www.depts.ttu.edu/registrar/private/CrsInventory/default.aspx)

Questions about this form should be directed to the Office of Official Publications, 806.742.3677.  
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**SECTION 1: COURSE INFORMATION** (Please complete ALL information in this section, regardless of the nature of the request.)

COLLEGE REQUESTING COURSE APPROVAL*					DEPARTMENT*				
COURSE PREFIX*		COURSE NUMBER* (proposed)		COURSE HOURS*		<b>NOTE REGARDING HOURS:</b> First digit is credit hours for course Second digit is contact hours for lecture Third digit is contact hours for credit lab Fourth digit is contact hours for noncredit discussion/lab CIP    LEC    C/LAB    DIS-NC			
EFFECTIVE TERM* (first term to be taught if new)		PREVIOUS COURSE PREFIX/NUMBER (if applicable)		Either the second or third digit will ALWAYS be zero, e.g.: 3:3:0:0, 3:2:0:2, or 1:0:2:0					
DOES THIS COURSE HAVE* VARIABLE HOURS		IF YES, HOURS ARE: V ___ - ___		DOES THIS COURSE CONTAIN A DISTANCE COMPONENT (check one)*		<input type="checkbox"/> Between 85-100% online (fully distance) <input type="checkbox"/> No distance/online component <input type="checkbox"/> Between 50-84% online (hybrid/blended)			
IS THIS A CROSS-LISTED COURSE:*		Y    N		IF YES, WITH WHICH COURSE IS IT CROSS-LISTED					
IS THIS A TANDEM (I.E. GRADUATE/UNDERGRADUATE) COURSE* (NOTE: Tandem courses require completion of justification on page 2)		Y    N		IF YES, WITH WHICH COURSE IS IT TAUGHT IN TANDEM					
DOES THIS COURSE COVER MULTIPLE TOPICS*		Y    N		SHORTENED TITLE FOR CLASS SCHEDULE LISTING IN BANNER* (30 characters max; include spaces but omit punctuation)					
PROPOSED THECB FUNDING LEVEL*									
CIP CODE*		To determine the CIP code for a new course, visit: <a href="http://www.irim.ttu.edu/CourseInventory.php">www.irim.ttu.edu/CourseInventory.php</a>							
IS THIS COURSE PART OF THE UNIVERSITY'S CORE CURRICULUM?*		Y    N							

**PROPOSED ACTION:**    Add a Course – COMPLETE SECTION 2    Change a Course – COMPLETE SECTION 3    Delete a Course – COMPLETE SECTION 4

**SECTION 2: ADD A COURSE** (Please include syllabus of proposed course; for tandem courses, attach syllabi for both graduate and undergraduate levels.)

COURSE PREFIX		COURSE NUMBER		COURSE HOURS		PRIMARY ACTIVITY TYPE			
MAY THIS COURSE BE REPEATED FOR CREDIT		Y    N		TOTAL CREDIT HOURS IF REPEATED		SECONDARY ACTIVITY TYPE (if applicable)			
FULL COURSE TITLE									
COURSE DESCRIPTION (25 words maximum, excluding Prerequisite or Corequisite listings; unless indicated, all prerequisites will require a grade of D or higher.)									

**SECTION 3: CHANGE A COURSE** (Please include syllabus of course; for tandem courses, attach syllabi for both graduate and undergraduate levels.)

TYPE OF CHANGE (select all that apply; control-click [PC] or command-click [Mac] to select multiple items)		CURRENT COURSE PREFIX		CURRENT COURSE NUMBER		CURRENT COURSE HOURS	
		PROPOSED COURSE PREFIX		PROPOSED COURSE NUMBER		PROPOSED COURSE HOURS	
CURRENT COURSE DESCRIPTION (include Prerequisite and Corequisite information; unless indicated, all prerequisites will require a grade of D or higher.)							

PROPOSED COURSE DESCRIPTION (25 words maximum; include Prerequisite and Corequisite information; unless indicated, all prerequisites will require a grade of D or higher.)

CURRENT COURSE TITLE		PROPOSED COURSE TITLE		NOTES	
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**SECTION 4: DELETE A COURSE** (In addition, please complete academic justification field on next page.)

COURSE PREFIX		COURSE NUMBER		HOURS		NOTES	
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**ACADEMIC JUSTIFICATION**  
(Required for course additions, changes, and deletions.)

**RESOURCE JUSTIFICATION**  
(Required for course additions **and** changes)

**TANDEM COURSE JUSTIFICATION**

(Please explain how the graduate course requirements are progressively more advanced than those for the undergraduate course. Include syllabi for both courses when submitting form.)

**APPROVALS** (NOTE: Once document is signed it will automatically Save As a new file, so signature should be applied as final steps.)

DEPARTMENT FACULTY REPRESENTATIVE	GRADUATE SCHOOL REPRESENTATIVE
COLLEGE FACULTY REPRESENTATIVE	VICE PROVOST
ADDITIONAL CONTACT PERSONS	NOTES OR ADDITIONAL INFORMATION REGARDING COURSE