

COURSE ACTION PROPOSAL FORM
University at Albany, State University of New York
School of Public Health

Proposal # _____

<input type="checkbox"/> New Course	Revision of: <input type="checkbox"/> Number	<input type="checkbox"/> Description
<input type="checkbox"/> Cross-listing	<input type="checkbox"/> Title	<input type="checkbox"/> Grading System
<input type="checkbox"/> Course Deletion	<input type="checkbox"/> Mode of Course delivery (e.g., distance learning)	<input type="checkbox"/> Credits
	<input type="checkbox"/> Prerequisites	

Estimated enrollment for this course (best guess): _____

Department _____ Course#: New _____ Old _____

Course Title _____ Credits: _____

Prerequisites _____

Has this course been taught previously? yes no

If yes, give title and course number: _____

If yes, how many times has it been taught? _____

Course description to appear in catalog: (Please do not exceed 50 words)

Justification of Proposal: For justification, please address in detail the reasons for offering this new course or the course revision. These reasons should address one or more of the following: curriculum enhancement, new program or concentration development, new student recruitment (esp. for distance learning courses), target audience(s) for course, and "other justification". Please be as specific as possible in describing the overriding justification for offering this course.

Attach course syllabus to this form. (All proposals must contain a complete or nearly complete syllabus (including listing the learning objectives). Otherwise, they will be returned unreviewed to the department and instructor)

Course presented for S-U grading: Yes No Semester Effective: _____ (date)

Justification for S-U grading:

Cross-list Department (if appropriate) _____

Other School or Department affected by this proposal:

For new courses or revised courses in which core content, mode of delivery, or learning objectives have changed:

1. Approximate percentage of class which will be conducted "on site", i.e., students attending SPH classrooms to take the course: _____

Note: If on-site percentage is less than 75% of total class hours please provide a brief rationale for the off-site time. The strength and detail of the rationale should be in proportion to the off-site component. If this is a distance learning new or revised course, please explain any on-site component more fully or, if there is no on-site component at all, please provide a rationale for teaching the entire course without an on-site component.

2. Please identify all computer software or hardware student needs for this course. Please make sure that any "above average" needs in these areas (e.g., a special type of hardware configuration, a laptop, costly software, etc.) are explained in relation to course learning objectives listed on the syllabus.
3. Please identify any additional equipment to be used in the course (e.g., microscopes, etc.) and how students will be able to access this technology.
4. Chair's statement/endorsement (required): Please provide additional information on the need for/value of proposed new course/course revision from department chair and/or curriculum committee.

Action	Approved	Not Approved	Return to Consider	Signature	Date
Dept. Curriculum Committee					
Department Chair					
School Academic Committee					
Dean of School					
Other Schools of Dept. (if applicable)					
Graduate Studies					
Undergrad Studies					
Action by GS & US					
Listed in Masterfile, School notified					