Course Addition to the Banner Catalog
Items in RED are REQUIRED

Effective Term: _____   **Subject Code**: _____   **Course Number**: _____

Course Title (30 character limit, including spaces): _____

College (AS or SB): _____   **Division (BSOB, HUM, SMH, SSEG):** _____

Lab Fee: _____   **Special Tuition – Amount:** _____   **Fee Type (Flat, Per Credit):** _____

Grade Mode (please check all that apply): ☐ Standard ☐ Audit ☐ Pass/Fail ☐ Satisfactory/Unsatisfactory (0 credit)

Credit Hours: _____ **Lecture Hours[1]:** _____ **Lab Hours[2]:** _____ **Contact Hours[3]:** _____ **CEU Hours:** _____

[1]- Hours the instructor will be in classroom contact with the students per week
[2]- Hours the instructor will be in lab contact with the students per week
[3]- Hours the instructor will be in classroom/lab contact with the students per week

Is this course repeatable? (Is the course offered with different content, i.e. Special Topics?) (yes or no) _____

      If yes, please indicate-
- **The maximum hours that can be earned: _____**
- **The maximum hours that can count towards degree requirements: _____**

Schedule Type/Delivery Method (Courses can have more than one type at the Catalog level but **NOT at the section level** - please circle all that apply at the catalog level):

Code	Description	Code	Description	Code	Description
AA	Academic Advising	INR	Independent Research	RPR	Individual Research Project
ACT	Activity Course	INT	Internship	SE	Seminar
CO	Cooperative Education	LB	Lab	ST	Studio
CPS	Capstone Course	LE	Lecture	STA	Study Abroad
EXP	Experiential	OIN	Online Independent Study	TCH	Student Teaching
FLD	Field Experience	OTH	Other	TH	Thesis or Essay
HYB	Hybrid-Online&Classroom Course	PE	Performance	WE	Web/Online Course
I/S	Internship & Seminar	PEM	Permanent Employment	WK	Workshop
IMM	Immersion	PR	Practicum	WW	Online Workshop
IND	Independent Study	RDG	Readings		

Co-requisite(s): _____
This co-requisite is required to be taken at the same time as the primary course. **This area is not to be used for prerequisites with concurrency.**

Prerequisite(s)/Prerequisite(s) with concurrency*: _____

_____
*Indicating a prerequisite with concurrency means that the courses can be taken simultaneously. **Please mark these with an asterisk.**

Equivalent Course(s): _____
List any previous course numbers if this course was ever been offered under a different course number or subject

Mutually Exclusive Course(s): _____
List any course numbers that cannot be taken with or in addition to this course. (Content of both courses have enough overlap to justify only allowing a student to register for one of the courses, but not both.)

Registration Restriction (please choose all that apply and also specify the appropriate code or codes):

Selecting any of these will allow only students who fit these criteria to register for the course.

	Department		e.g. HS (to restrict to History department)
	Major		e.g. AC (to restrict to declared AC majors)
	Class		e.g. Freshman, Sophomore, etc.
	Program		e.g. SCC-CR (Program codes (including tracks))
	Student Attribute		e.g. HNRS (to restrict to Honors students)
	Cohort		e.g. FR 13 (for students who entered in Fall 2013)

New Core Code* (please circle all that apply):

*Note: Core designations must be approved by the Core Committee.

Code	Description	Code	Description	Code	Description
AW	Additional Writing Course	ISJ	Issues in Social Justice	SCI	Science Distribution
C	Capstone Experience	OP	Oral Presentation	SOC	Social Science Distribution
CAPA	Creative and Performing Arts	PLKR	Philosophy Knowledge & Reality		
EGC	Engaging the Global Community	PLVS	Philosophy Value & Society		
HUM	Humanities Distribution	QA	Quantitative Analysis		

For CAPP/Degree Audit building purposes, please explain how this course meets major/minor degree audit requirements (i.e Can this course count as a major elective? Does it meet a specific requirement for a minor?) (This question is not asking how the course addresses learning goals or pedagogical rationale.)

_____

_____

_____

Please attach a copy of the course description to this form.

Department Chair Signature (required): _____ **Date:** _____

Core Director Signature (if applicable): _____ **Date:** _____

Dean Signature (required): _____ **Date:** _____

Once approved, please send copy to AVP's Office and Registrar's Office for processing.