



Curriculum Proposal Origination Form: Courses

Purpose:

This form guides faculty, department chairs, and school deans in originating curriculum proposals for their school's internal curriculum committee to review and approve, prior to the CCC process.

*This form is for **course-level** changes only.* Types of course-level proposals: A) New Courses, B) Course Revisions, and C) Course Deactivations.

You only need to fill out the section corresponding to the type of proposal you are originating. *Please submit the completed form to your school's Curriculum Liaison.*

School:	
Proposal Originator(s):	
Date of Submission:	
Type of Proposal:	<input type="checkbox"/> New Course (Section A) <input type="checkbox"/> Course Revision (Section B) <input type="checkbox"/> Course Deactivation (Section C)
Effective term/year of proposed change:	

Section A. New Course

Discipline:		
Course Prefix and Number:		
Course Title:		
Course Description:		
Student Learning Outcomes:		
Justification for New Course:		
Theory:	Credit Hours:	Contact Hours per Term:
Lab:	Credit Hours:	Contact Hours per Term:
Clinical:	Credit Hours:	Contact Hours per Term:
Cooperative Education:	Credit Hours:	Contact Hours per Term:
Field Experience:	Credit Hours:	Contact Hours per Term:
Internship:	Credit Hours:	Contact Hours per Term:
Practicum:	Credit Hours:	Contact Hours per Term:
Studio:	Credit Hours:	Contact Hours per Term:
Integrated Service Learning:	Credit Hours:	Contact Hours per Term:
Pre-requisites:		
Co-requisites:		
Pre- or Co-requisites:		
Impact of Change:	Affect existing transfer agreements? <input type="checkbox"/> Yes <input type="checkbox"/> No Affect existing accreditations? <input type="checkbox"/> Yes	

	<input type="checkbox"/> No Affect pre- or co-requisite considerations? <input type="checkbox"/> Yes <input type="checkbox"/> No Affect graduation requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No Negatively affect continuing students? <input type="checkbox"/> Yes <input type="checkbox"/> No Increase need for additional course offerings (sections)? <input type="checkbox"/> Yes <input type="checkbox"/> No Is this course repeatable for credit? <input type="checkbox"/> Yes <input type="checkbox"/> No
Financial Aid Questions:	Does this course fulfill a degree or certificate requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Does this course have lab credit hours? <input type="checkbox"/> Yes <input type="checkbox"/> No Has this course been offered previously under a different name? <input type="checkbox"/> Yes <input type="checkbox"/> No
Transferability:	Was your proposed new course developed specifically for transfer to a program at a NM 4-year higher education public institution(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No
Attach a copy of course outline or course syllabus.	



Section B. Course Revision

Discipline:		
Course Prefix and Number:		
Course Title:		
Course Description:		
Student Learning Outcomes:		
List of change(s):		
Reason for Revision:		
Theory:	Credit Hours:	Contact Hours per Term:
Lab:	Credit Hours:	Contact Hours per Term:
Clinical:	Credit Hours:	Contact Hours per Term:
Cooperative Education:	Credit Hours:	Contact Hours per Term:
Field Experience:	Credit Hours:	Contact Hours per Term:
Internship:	Credit Hours:	Contact Hours per Term:
Practicum:	Credit Hours:	Contact Hours per Term:
Studio:	Credit Hours:	Contact Hours per Term:
Integrated Service Learning:	Credit Hours:	Contact Hours per Term:
Pre-requisites:		
Co-requisites:		
Pre- or Co-Requisites:		
Impact of Change:	Affect existing transfer agreements? <input type="checkbox"/> Yes <input type="checkbox"/> No Affect existing accreditations?	

	<input type="checkbox"/> Yes <input type="checkbox"/> No Affect pre- or co-requisite considerations? <input type="checkbox"/> Yes <input type="checkbox"/> No Affect graduation requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No Negatively affect continuing students? <input type="checkbox"/> Yes <input type="checkbox"/> No Increase need for additional course offerings (sections)? <input type="checkbox"/> Yes <input type="checkbox"/> No Is this course repeatable for credit? <input type="checkbox"/> Yes <input type="checkbox"/> No
Financial Aid Questions:	Does this course fulfill a degree or certificate requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Does this course have lab credit hours? <input type="checkbox"/> Yes <input type="checkbox"/> No Has this course been offered previously under a different name? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If you answered “yes” to any of the items above, please describe the effects of this change and actions you have taken to address them.
Transferability:	Was your proposed new course developed specifically for transfer to a program at a NM 4-year higher education public institution(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No Does the proposed revision impact existing transfer agreements? <input type="checkbox"/> Yes <input type="checkbox"/> No

Section C. Course Deactivation

Discipline:	
Course Prefix and Number:	
Course Title:	
Course Description:	
Reason for deactivation:	
Impact of Change:	<p>Affect existing transfer agreements?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <p>Affect existing accreditations?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <p>Affect pre- or co-requisite considerations?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <p>Affect graduation requirements?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <p>Negatively affect continuing students?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <p>Increase need for additional course offerings (sections)?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <p>Is this course repeatable for credit?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No
	<p>If you answered "yes" to any of the items above, please describe the effects of this change and actions you have taken to address them.</p>



Credit and Contact Hour Types/Ratios

Theory: A minimum of 15 hours per term constitutes one credit hour (1:1)

Laboratory: A minimum of 45 hours per term constitutes one credit hour (3:1)

Studios: A minimum of 30 hours per term constitutes one credit hour (2:1)

Practicum: A minimum of 45 hours per term constitutes one credit hour (3:1)

Cooperative Ed: A minimum of 45 hours per term constitutes one credit hour (3:1)

Field Experience: A minimum of 60 hours per term constitutes one credit hour (4:1)

Clinical: A minimum of 45 hours per term constitutes one credit hour (3:1)

Clinical Intensive: A minimum of 60 hours per term constitutes one credit hour (4:1)

Integrated Service Learning: A minimum of 20 contact hours per term, in conjunction with a theory course, constitutes one credit hour (20 contact hours per term:1)

Additional Guidelines

- Theory/lab combination courses will adhere to guidelines established above.
- Independent study and topics courses will be consistent with the guidelines identified for the particular type of instruction.
- Exceptions to the above guidelines, including courses which exceed the minimum contact time/credit hour ratios, will be referred to the Vice President for Academic Affairs.