

SWTJC Course Change Form

NEW

REVISION

INACTIVATION

REACTIVATION

Requested by:

Instructional Department:

Course Number and Title (original):

Course Title (as it will appear in catalog):

Rubric and Number:

CIP Code (xx.xxxx)/Approval Code

Semester Credit Hours:

Lecture Hours:

Lab Hours:

External Hours:

Academic

Technical

Workforce Education

ACGM

WECM

Unique Need

When will this program take effect? Term:

Year

What semester will the course be taught?

Course Description
(as it will appear in catalog):

TSI Requirements:

Prerequisite:

Co-requisite:

Fee Type:

Fee Amount:

Is Master Syllabus attached? **Changes will not be considered until master template is updated.**

Which program(s) will course change affect?

Why is this course change needed?