

Course Modification Form

Use this form if changes are to be applied to the existing course. \* Required fields

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| **\*Submitted by:**  | Click or tap here to enter text. | **\*Date:**  | Click to select a date**.** |

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| **\*Course Title:**  | Click or tap here to enter text. | **\*Course Number:** | Click here. |

**\*Brief description of proposed course change:**

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| Click or tap here to enter text. |

**\*Reason or rationale for proposed course change:**

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| Click or tap here to enter text. |

**\*Does this course change affect other programs or other courses? YES** [ ]  **NO** [ ]

If yes, attach document support from program faculty or course users.

**\*Does this proposal require additional resources?** **YES** [ ]  **NO** [ ]

(Equipment, personnel, etc.)Please explain:Click or tap here to enter text.

**\*Does this proposal affect an articulation agreement? YES** [ ]  **NO** [ ]

If YES, attach the articulation agreement to submission documents.

**\*Does this proposal call for teach-out for current students in the program? YES** [ ]  **NO** [ ]

If YES, attach the Teach-Out plan for current students and list semesters to completion of the Teach-Out plan.

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|  | **Current Information:** | **Proposed Information, if different or missing:** |
| **Course Number** |  |  |
| **Course Title** |  |  |
| **Credits (Total)** |  |  |
| **Lecture Credits** |  |  |
| **Lab Credits** |  |  |
| **Co-curricular Credits** |  |  |
| **Projected Maximum Class Size** |  |  |
| **Semester Offered** | Choose an item. | Choose an item. |
| **\*Proposed Effective Term:** (Term is the first day of the month when the term begins, i.e., August 1, 2023 | Click or tap to enter a date. |
| **Prerequisite(s)** |  |  |
| **Corequisite(s)** |  |  |
| **Course Description:** |  |  |
| **Course Expenses (if applicable):**  |  |  |

**Part II:** Do these modifications change the major content areas, learning outcomes, and/or Student Outcomes Assessment? If yes, please provide updated information below. Is this course part of the Minnesota Transfer Curriculum?

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| **Major Content Areas** (include primary topics or major course topics in this section – the “table of contents” for the course) |
| **Current Information** | **Proposed Information** |
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| **Course Level Student Learning Outcomes**  |
| **Current Information** | **Proposed Information** |
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| **Course Level Student Outcomes Assessment -** *List all Assessment Methods for assessing Learning Outcomes:*Examples: 1. Exam, objective2. Quiz, written3. Lab assignments4. Research papers5. Exam, practical |  |

**Minnesota Transfer Curriculum Courses**

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| If changes include adding or changing Minnesota Transfer Curriculum Goal Area(s) and/or Competencies, list each goal area and the MnTC competencies the course will address. Course must meet at least 51% of competencies in a goal area to be in that goal area. Limit to only 2 Goal Areas. |
| Select a goal area | List all competencies met here.  |
| Select a goal area | List all competencies met here.  |

**Part III: Program Learning Outcome – Core Ability**

 **Is this course used for a summative assessment of a Program Level Student Learning Outcome? YES** [ ]  **NO** [ ]  **If yes, which PLO?** Click or tap here to enter text.

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| **Core Abilities Met with this Course** |
| **Current Information** | **Proposed Information** |
| Choose an item. | Choose an item. |
| Choose an item. | Choose an item. |
| Choose an item. | Choose an item. |

**\*REVIEWED BY:** *It is recommended, but not required, that the Division Chair, Dean, and EVP review the proposed additions/changes to any program/courses before submission to the AASC.*

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| Division Chair |  | Click or tap to enter a date. |
| Dean |  | Click or tap to enter a date. |
| AASC Chair |  | Click or tap to enter a date. |
| EVP |  | Click or tap to enter a date. |