## EASTERN CONNECTICUT STATE UNIVERSITY CURRICULUM COMMITTEE FORM

## **NEW COURSE PROPOSAL**

- **Instructions:**
- 1. In addition to this completed form, a **new course proposal** requires:
  - A. A complete draft syllabus that includes:
    - The course number and title
    - The catalog course description (as proposed on this form)
    - Course goals and/or learning objectives (Note: LAC Disciplinary Perspective courses must also include at least 2 LAC learning outcomes and at least 1 high impact teaching practice. List all assignments that address learning outcomes and high impact teaching practices from Step 5 of the LAC Course Planning Tool. Disciplinary perspective courses are listed by their primary LAC learning outcome, but must address at least 2 LAC learning outcomes.)
    - Methods of assessment and evaluation (including how they comprise the student's final course grade [percentages or point values])
    - Course bibliography, reading list, and/or other required materials
    - Course outline/calendar illustrating the material/concepts to be covered and their tentative distribution over the term of the course
  - B. Official approval emails from the following, if necessary: Chair of Department with overlapping course; Writing Program Director; LAPC Chair.

Note: All New Course proposals should be submitted along with a separate Program Modification proposal, unless the new course will not contribute to a major or minor such as an LAC only course.

- 2. Upon completion, save the form and all supporting documents as a **single PDF file** and send it to the Department Chair and the Academic Dean for their esignatures. If the course contributes to the an additional program, i.e. departmental program, writing program, or LAC, send it to the respective program coordinator prior to submission to Curriculum. Please do not request e-signatures from the Curriculum Committee chair, however, you may cc: them. Please name the file according to the following guidelines:
  - Course Abbreviation (in all caps)  $\rightarrow$  Course Number  $\rightarrow$  Date  $\rightarrow$  Form Name For Example: BIO100\_2022\_NewCourse.pdf
- 3. Forward the signed proposals and supporting documents to Julie McGowan (<a href="mailto:mcgowanju@easternct.edu">mcgowanju@easternct.edu</a>) in the Biology Department for review by the Curriculum Committee. Please do not forward any proposals to Julie until they have been signed by all parties.
  - Due to the large number of proposals and paperwork received by the committee, paperwork that is not complete, organized, formatted correctly, or labeled clearly will be returned to the departments for resubmission. Any questions regarding paperwork prior to submission should be addressed to the Curriculum Committee Chair. Any questions regarding courses that contribute to other programs should be addressed to the program coordinator.
- 4. Resubmitting Revised Forms:

Proposals that are returned to the department for revisions or additions requested by the Curriculum Committee will be sent via email. When indicated by the committee, substantive revisions should be initialed by the dean and relevant committee chairs. When revisions/additions are completed, forms and documentation should be resubmitted to Julie McGowan as a single PDF.

## EASTERN CONNECTICUT STATE UNIVERSITY CURRICULUM COMMITTEE FORM

## **NEW COURSE PROPOSAL**

| Course Prefix:                                         |            | Course Number:                      |                           |                                          | Proposing Department:                      |                                                                     |                   |
|--------------------------------------------------------|------------|-------------------------------------|---------------------------|------------------------------------------|--------------------------------------------|---------------------------------------------------------------------|-------------------|
| Chair or Director Name:  Effective Semester: SEMESTER: |            |                                     |                           | Chair o                                  | Chair or Director email:                   |                                                                     | @easternct.edu    |
|                                                        |            | SEMESTER:                           | YEAR:                     |                                          | Must be approved at least 1 semester prior |                                                                     | to effective date |
| CATALOG cou                                            | urse title | (max 60 characte                    | rs including spa          | ces):                                    | E-WE                                       | EB course title (max 30 characters inc                              | luding spaces):   |
| Cross-listing:                                         |            | n existing course:                  | Prefix: _<br>Prefix: _    |                                          | mber:                                      | REQUIRES Modification of an REQUIRES separate New Coul              |                   |
| Hours and credits:                                     | Lecture    | hours/semester:<br>Student credits: |                           | Lab hours/seme                           |                                            | Total semester hours:                                               |                   |
| Enrollment cap: Prerequisites:                         |            | Standard                            | grading proced            | ure: Letter                              | CR/NC Co-requis                            | sites:                                                              |                   |
| Permissions requir                                     | ed (check  | all that apply):                    | Instructor                | Chair                                    | Dean                                       |                                                                     |                   |
| Mode of instructio                                     | n (check   | all that apply):                    | Lecture Independer Online | Seminar nt Study Hybrid                  | Laboratory Internship                      | Studio Field Experience rses REQUIRE an Online Course Appro         | aval form         |
|                                                        |            |                                     | Other:                    | Шпурпа                                   | ← mese cou                                 | rses Regular all Ollille Course Appro                               | oval lottii       |
| Major/Minor/Elect                                      | tive Desig | nation:                             | other.                    | New                                      | Liberal Arts Co                            | re Designation:                                                     |                   |
| MAJOR requirer                                         | ment or e  | lective (REQUIRE                    | S Program Mod             |                                          | Primary Learning                           |                                                                     |                   |
| ☐ MINOR requirer☐ GENERAL ELECT                        |            | •                                   | _                         | <del>-</del>                             | Liberal Arts Disci                         | •                                                                   | al Sciences STEM  |
| Repeatability (for s Course is repea                   | table with | •                                   | and can count fo          |                                          | ☐ course                                   | is NOT repeatable                                                   |                   |
| University Writing STAGE 2 Writing                     | •          | •                                   |                           | Modification AND riting <i>intensive</i> | ·· —                                       | ing Program Director)<br>GE 3 writing <i>intensive in the major</i> |                   |
| Other course desig                                     | nations:   | □ oı                                | D LAC - Specify           | Tier/Category                            |                                            | REQUIRES LAPC Chai                                                  | r approval        |

| Catalog course description (please provide a clear description of the course for students as it appears on the syllabus; suggested 25 word minimum):     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                          |
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|                                                                                                                                                          |
| Rationale for the new course in terms of student, programmatic, or university needs and if for Disciplinary Perspectives list: all learning outcomes and |
| high impact teaching practices associated with course.                                                                                                   |
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|                                                                                                                                                          |
|                                                                                                                                                          |
|                                                                                                                                                          |
| Minimal instructor qualifications:                                                                                                                       |
| Degree required:                                                                                                                                         |
| Special expertise or experience required (if course is proposed for online instruction, include qualifications to teach online):                         |
|                                                                                                                                                          |
|                                                                                                                                                          |
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|                                                                                                                                                          |
|                                                                                                                                                          |
| Special resources needed for the course (such as unusual equipment or maintenance costs, special software, library resources, etc):                      |
|                                                                                                                                                          |
|                                                                                                                                                          |
|                                                                                                                                                          |
|                                                                                                                                                          |
|                                                                                                                                                          |
| Special classroom facilities needed for the course (such as computer lab, science lab, art studio or seminar room):                                      |
|                                                                                                                                                          |
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| Course Prefix:                            | Course Number:                                      | Proposing Department:                                                    |
|-------------------------------------------|-----------------------------------------------------|--------------------------------------------------------------------------|
|                                           | SIGNA                                               | TURES:                                                                   |
|                                           | 0.01                                                |                                                                          |
| Department Chair:                         |                                                     |                                                                          |
| Name:                                     | Signature:                                          | Date:                                                                    |
| -<br>-aculty - if Disciplinary Perspectiv | ves. This signature signifies that I/ any instruc   | tor hereby agree to provide the LAC with artifacts for each student.     |
|                                           | Signature:                                          | · · ·                                                                    |
|                                           |                                                     | rse overlaps that of a course or courses offered by another department): |
| Name:                                     |                                                     |                                                                          |
|                                           | Signature.                                          | Date:                                                                    |
| Academic Dean:                            | Signatura                                           | Doto                                                                     |
| Name:                                     | Signature:                                          | Date:                                                                    |
| Vriting Program Director (Univer          | sity Writing Program designations only):            |                                                                          |
| lame:                                     | Approval from Writing Progra                        | m Director should be sent via email with the proposal/s attached         |
| APC Chair (LAC courses only):             |                                                     |                                                                          |
| Name:                                     | Approval from LAPC Chair sho                        | ould be sent via email with the proposal/s attached                      |
|                                           |                                                     |                                                                          |
| Curriculum Committee Chair:               | Do not request e-signature from Chair. Signature to | o follow Curriculum Committee review                                     |
| Name:                                     | Signature:                                          | Date:                                                                    |
| Senate President:                         |                                                     |                                                                          |
| Name:                                     | Signature:                                          | Date:                                                                    |

| FOR REGISTRAR'S USE ONLY: |  |            |  |           |  |  |  |  |  |
|---------------------------|--|------------|--|-----------|--|--|--|--|--|
| Date Processed:           |  | Signature: |  | CIP Code: |  |  |  |  |  |