

EASTERN CONNECTICUT STATE UNIVERSITY
CURRICULUM COMMITTEE FORM
MODIFICATION OF AN EXISTING COURSE
Fast Track Form

Please use this form to:

- | | |
|---|---|
| 1. Remove course from catalog (temporary) | 6. Change course repeatability |
| 2. Delete course from catalog (permanent) | 7. Change course description |
| 3. Change enrollment limit | 8. Add, change, or delete permission/s required |
| 4. Change eWeb course title | 9. Add, change, or delete Writing Program |
| 5. Change catalog course title | |

Instructions:

1. Complete this form and all other forms and documentation required by the changes being made (see instructions throughout form)

This includes:

- Official approval emails from the following, as appropriate: Writing Program Director, LAPC Chair, LAW Committee Chair
- E-signatures from the Department Chair (required) and Academic Dean (if applicable).

Note: For proposed changes requiring Program Modification form and documentation should be submitted separately.

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 e-signatures. Please do not request e-signatures from the Curriculum Committee chair, however, you may cc: them.
3. Submit the PDF containing the signed form and all documentation to Julie McGowan (mcgowanju@easternct.edu) in the Biology Department for review by the Curriculum Committee.

Note: Signed forms and supporting documents should be combined into one PDF. Please name the file according to the following guidelines:

Course Abbreviation (in all caps) → Course Number → Date → Form Name *For Example:* **BIO100_2022_FastTrack.pdf**

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.**

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.

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Proposing Department: _____

Chair or Director Name: _____ Chair or Director email: _____ @easternct.edu

Proposed Effective Semester:
Must be approved at least 1 semester prior to effective date SEMESTER: _____ YEAR: _____

Single Course
Course Prefix and Number: _____ Course Name: _____

Multiple Course Option
Please list ALL of the courses for which you would like to request the same modification
Note: Multiple course option can only be used for course removals, deletions, and changes to enrollment limits

Course Prefixes/Numbers/Names: _____

Proposed Change	Existing Course Information	Proposed Modifications
<input type="checkbox"/> Remove course from catalog--TEMPORARY <i>If this course is part of the program, please complete a Program Modification form</i>	N/A	N/A
<input type="checkbox"/> Delete course from catalog--PERMANENT <i>If this course is part of the program, please complete a Program Modification form</i>	N/A	N/A
<input type="checkbox"/> Change enrollment limit: REQUIRES Dean's signature	Existing enrollment limit: _____	Proposed enrollment limit: _____
<input type="checkbox"/> Change eWeb course title: <i>If this course is part of the program, please complete a Program Modification form</i>	Existing eWeb course title:	Proposed eWeb course title: (max 30 characters including spaces):
<input type="checkbox"/> Change catalog course title: <i>If this course is part of the program, please complete a Program Modification form</i>	Existing catalog course title:	Proposed catalog course title: (max 60 characters including spaces):

Proposed Change	Existing Course Information	Proposed Modifications
<input type="checkbox"/> Change course repeatability <i>(for special topic/field experience/internship courses only)</i>	Existing course repeatability: <input type="checkbox"/> Course is NOT repeatable <input type="checkbox"/> Course is repeatable--with different topics or learning experience & can count for major/minor <input type="checkbox"/> up to _____ times <input type="checkbox"/> up to _____ times	Proposed course repeatability: <input type="checkbox"/> Course is NOT repeatable <input type="checkbox"/> Course is repeatable--with different topics or learning experience & can count for major/minor <input type="checkbox"/> up to _____ times <input type="checkbox"/> up to _____ times
<input type="checkbox"/> Change course description	Existing course description:	Proposed course description: (provide a clear description of the course for students; 25 word min)
Permission/s required: <input type="checkbox"/> ADD permission required <input type="checkbox"/> CHANGE permission required <input type="checkbox"/> DELETE permission required REQUIRES Dean's signature	Existing permission/s required: <i>(check all that apply)</i> <input type="checkbox"/> Instructor <input type="checkbox"/> Chair <input type="checkbox"/> Dean <input type="checkbox"/> None	Proposed permission/s required: <i>(check all that apply)</i> <input type="checkbox"/> Instructor <input type="checkbox"/> Chair <input type="checkbox"/> Dean <input type="checkbox"/> Delete existing permission required
Liberal Arts Core (LAC) course designation: REQUIRES LAC proposal grid & LAPC Chair's approval <input type="checkbox"/> ADD LAC designation <input type="checkbox"/> CHANGE LAC designation <input type="checkbox"/> DELETE LAC designation	Existing Liberal Arts Core (LAC) course designation: <input type="checkbox"/> LAC Tier _____ Category: _____ <input type="checkbox"/> None	Proposed Liberal Arts Core (LAC) course designation: <input type="checkbox"/> ADD/CHANGE to: LAC Tier _____ Category _____ <input type="checkbox"/> DELETE existing LAC designation
University Writing Program designation: REQUIRES program modification and the Writing Program Director's approval <input type="checkbox"/> ADD writing designation <input type="checkbox"/> CHANGE writing designation <input type="checkbox"/> DELETE writing designation	Existing writing designation: <input type="checkbox"/> STAGE 2 Writing <i>Enhanced</i> <input type="checkbox"/> STAGE 2 Writing <i>Intensive</i> <input type="checkbox"/> STAGE 3 Writing <i>Intensive in the Major</i> <input type="checkbox"/> None	Proposed writing designation: Add/change to: <input type="checkbox"/> STAGE 2 Writing <i>Enhanced</i> <input type="checkbox"/> STAGE 2 Writing <i>Intensive</i> <input type="checkbox"/> STAGE 3 Writing <i>Intensive in the Major</i> <input type="checkbox"/> Delete existing writing designation
Liberal Arts Work (LAW) designation: REQUIRES the LAW Committee Chair's approval <input type="checkbox"/> ADD LAW designation <input type="checkbox"/> DELETE LAC designation	N/A	N/A

Special resources needed for the modified course (such as unusual equipment or maintenance costs, special software, library resources, etc):

Special classroom facilities needed for the modified course (such as computer lab, science lab, art studio or seminar room):

Provide a clear RATIONALE for each proposed modification:

Proposing Department: _____

SIGNATURES:

Department Chair:

Name: _____ Signature: _____ Date: _____

Academic Dean: (if applicable—REQUIRED only for changes to enrollment limit and permission/s required)

Name: _____ Signature: _____ Date: _____

Writing Program Director (University Writing Program designations only):

Name: _____ Approval from Writing Program Director should be sent via email with the proposal/s attached

LAPC Chair (LAC courses only):

Name: _____ Approval from LAPC Chair should be sent via email with the proposal/s attached

LAW Committee Chair (LAW designations only):

Name: _____ Approval from LAW Committee Chair should be sent via email with the proposal/s attached

Curriculum Committee Chair: Do not request e-signature from Chair. Signature to follow Curriculum Committee review

Name: _____ Signature: _____ Date: _____

Senate President:

Name: _____ Signature: _____ Date: _____