



## Faculty Curriculum Change Form (F-CCF)

REQUEST TO: ☐ ADD ☐ MODIFY ☐ DELETE

☐ PROGRAM ☐ DEGREE ☐ MAJOR ☐ MINOR ☐ COURSE(S)

\_\_\_\_\_  
Department

\_\_\_\_\_  
Faculty

\_\_\_\_\_  
[Date]

This request is ☐ Substantive ☐ Non-substantive

[Catalog Title of Program/Degree/Major/Concentration/Minor/Course(s)]

Will this proposed change affect any general education or graduation requirement courses? No If yes, submit required documentation to the Department Chair. If no, follow normal curriculum change procedures.

Please submit a description of the curriculum change(s) and a rationale for the change(s). Be sure to include any impact to course enrollment, faculty load, or division budget. **Please be thorough and clear.**

- 1.) Enter the course number, title, and current catalog description.
- 2.) Specify whether the change applies to undergraduate, graduate, or both levels.
- 3.) Indicate the nature of the change: title, credits, prerequisites, course content, learning outcomes, etc.
- 4.) If adding or removing a course, clearly state the rationale.
- 5.) Provide a brief explanation for the proposed modification, referencing assessment data, accreditation standards, student feedback, or pedagogical improvements.
- 6.) Note whether the change affects other courses, programs, or departments.
- 7.) List any consultations or approvals obtained (e.g., from other faculty or advisory boards).
- 8.) Indicate the term and year when the change should take effect.
- 9.) Attach updated syllabi, revised catalog descriptions, or comparison tables if applicable.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature Page and Summary of Discussions and /or Reservations**

Please address any potential issues or concerns not addressed by the proposal that may be areas in question by later reviewers. Please choose either Y or N to indicate approval/non-approval. Where listed, please also not Substantive or Non-substantive if you disagree with the original submitter's classification shown on the previous page. The Faculty Senate Committee chair should also record the outcome of the committee's vote.

Review Individual or Committee	Date	Summary of Discussions	Summary of Reservations
Department Chair		Approved? Yes	
Registrar (new courses only)		New Course Number(s)	
Senate President		Approved? Yes	Vote: For:    Against: Abstain:
VPAA		Approved? Yes	

**\*\*VPAA will verify HLC notification/verification/requirements have been completed prior to providing sign-off.**

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