

## Request for Curriculum Council Action

TO: Zahia Drici, Associate Dean of Curriculum

DATE SUBMITTED: \_\_\_\_\_

(Please submit 1 double-sided copy of your proposal)

FROM: (Name) \_\_\_\_\_ (Department) \_\_\_\_\_

1. Proposed Action (Please check all that apply):

	Title	Number	Units
<input type="checkbox"/> New Course (No Gen Ed)	_____	/	/
<input type="checkbox"/> New Course (Gen Ed)	_____	/	/
<input type="checkbox"/> Gen Ed for Existing Course:	_____	/	/
<input type="checkbox"/> Deletion	_____	/	/
<input type="checkbox"/> Change title from	_____	/	/
to	_____	/	/
<input type="checkbox"/> Change number from	_____	/	/
to	_____	/	/
<input type="checkbox"/> May Term Course	_____	/	/
<input type="checkbox"/> New Major/Minor	_____		
<input type="checkbox"/> Revised Major/Minor	_____		
<input type="checkbox"/> Other	_____	/	/

2a. Please check the category, if any, for which you are requesting General Education unit credit:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Analysis of Values               | <input type="checkbox"/> Gateway Colloquium      | <input type="checkbox"/> Life Science Lab        |
| <input type="checkbox"/> The Arts                         | <input type="checkbox"/> Intellectual Traditions | <input type="checkbox"/> Physical Science Issues |
| <input type="checkbox"/> Contemporary Social Institutions | <input type="checkbox"/> Literature              | <input type="checkbox"/> Physical Science Lab    |
| <input type="checkbox"/> Cultural and Historical Change   | <input type="checkbox"/> Second Language         | <input type="checkbox"/> Physical Education      |
| <input type="checkbox"/> Formal Reasoning                 | <input type="checkbox"/> Life Science Issues     | <input type="checkbox"/> Fitness                 |

2b. Please check the flag(s), if any, you are seeking:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Writing Intensive | <input type="checkbox"/> Global Diversity | <input type="checkbox"/> U.S. Diversity |
|--|---|---|

2c. In what way will you assess how this course has met the goals of the Gen Ed category and/or flag(s) for which you are applying?

Use the Gen Ed Student Survey (go to <http://www.iwu.edu/melloncenter/support/intra/General-Education.shtml> to find out if one is available)

Use different tool/method (please explain)

3. Please insert here the proposed catalog course description. Course descriptions should be limited to no more than 50 words, not counting (a) title; (b) prerequisites; (c) General Education category; and (d) when offered.

4. Please list any prerequisites: \_\_\_\_\_

5. When will this course first be offered? \_\_\_\_\_

6. Please indicate how often course is offered. *Check only the single item that best describes this course. Because these are the only intervals used in the University Catalog, please do not edit or alter the list to fit a particular course. For example, if your course is offered every third year—an interval that does not appear in the Catalog—you might choose “Offered as needed” or “Offered occasionally” instead.*

Offered each semester

Offered each Fall Term

Offered each spring

Offered each May Term

Offered each semester and May Term

Offered occasionally

Offered in alternate years

Offered in alternate years, Fall Term

Offered in alternate years, Spring

Offered in alternate years, May Term

Offered annually

Offered every third semester

Offered as needed

Offered on request

Offered by arrangement

7. Is/are any other department(s) affected in any way by this request (e.g., course is cross-listed, team-taught, etc.)?

No.

Yes. In what way?

\_\_\_\_\_  
Signature of the Head(s) of the Affected Department(s), School(s) or Program(s)

8. **WRITTEN RATIONALES:** If this proposal presents a new course (whether for General Education credit or not), an existing course for which General Education credit is now being sought, a May Term course, or a new major, minor or concentration, please attach a written rationale, following the guidelines found in the *Curriculum Development Handbook*. Please note that CC cannot evaluate incomplete proposals, so to expedite consideration of your submission, you are encouraged to read and follow the guidelines carefully.

9. The Curriculum Council assumes that the faculty members of your department have seen and approved of this request. Please sign below if this assumption is correct:

\_\_\_\_\_  
Signature of Faculty Member Primarily Responsible for This Proposal

\_\_\_\_\_  
Signature of the Head of the Department, School or Program