Proposals must be received by **OCTOBER 15th 2014** for the 2015-2016 academic year (Summer/Fall 2015, Spring/Summer 2016). Please submit the SIGNED ORIGINAL of the full package, which includes this request form, the course syllabus, checklist, and supporting documents, and an electronic copy of the syllabus, to your ARC representative, who will deliver them to ARC. Also include one printout of the current program requirements indicating how the course fits in the program.

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**SECTION A**

Faculty Name: ______________________________ Email: ___________________@ramapo.edu

School: _______ Convening Group: ____________________________ Date: ____________

Anticipated first semester (Summer 2015 or later): ___________________

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**SECTION B - COURSE REVISION**

1. Current Course I.D.: ________ Current Course Title: ____________________________

2. Type of Course Revision (Check ALL that apply):
   - **Discipline change**
     - From: __________________
     - To: __________________
   - **Cross-listing change:**
     - Add subject code: ______
     - Drop subject code: ______
   - **Level change**
     - From: __________________
     - To: __________________
   - **Prerequisite**
     - From: __________________
     - To: __________________
   - **Restriction**
     - From: __________________
     - To: __________________
   - **New Title:**
     - Full title: __________________________
     - 30-character title: __________________

   - **Course Description change** (describe separately)
   - **Major Content Change** (describe separately)
   - **Gen. Ed. Category change**:
     - From: __________________
     - To: __________________
   - **WI designation change:**
     - Add WI status
     - Drop WI status
   - Chair of Writing Across the Curriculum (WAC) Committee signature required
   - **Fee change** (specify type/amount):

3. Specific requirements this course will fulfill (for Degree Evaluation).
   - **ONLY COMPLETE THIS SECTION FOR CHANGES THAT ARE BEING MADE.**

   - School Core: _________ Subcategory: ____________ Type:
   - Major/concentration: ____________ Subcategory: ______ Type:
   - Minor: ____________ Subcategory: ______ Type:
   - Other: ______________________________________________________

4. Rationale for change:

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1. A “prerequisite” is a course; other restrictions (e.g. class standing, specific majors) are “restrictions”.
2. ARC may deem a change substantive enough to merit a new course ID for the course
3. e.g., lab fee, studio fee, liability insurance fee, etc.; contact Bursar for additional information
4. Required in this category? Or fulfills a distribution requirement?
5. Is this revised course now replacing an existing course (that is, a course that will now be removed from the Course Catalog)?  □ Yes  □ No
   If yes:
   a. Existing Course I.D.: __________ Course Title: ______________________
   b. Effective end date of the existing course being replaced (term/year): ______________
   c. Is the existing course a prerequisite for another course(s)? If so, please specify: __________

SECTION C - REVIEW AND APPROVAL (include all that apply)

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<tr>
<th>Title</th>
<th>Print name</th>
<th>Sign</th>
<th>Date</th>
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<tbody>
<tr>
<td>Convener</td>
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<tr>
<td>Graduate Program Director</td>
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<tr>
<td>School Curriculum Committee chair</td>
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<tr>
<td>Graduate Directors’ Committee chair</td>
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<td>WAC committee chair</td>
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<td>Study Abroad committee chair</td>
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<td>Dean</td>
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<tr>
<td>VPCA (for INTD, EXSS, COND &amp; CIPL courses)</td>
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</tbody>
</table>

If course fulfills requirements in more than one program, additional signatures are required:

- Convener #2
- Convener #3
- Dean #2
- Dean #3

ARC Use Only:
ARC disposition:
□ This course request has been reviewed, approved and forwarded to the Office of the Provost for final course approval.
□ New Course ID required
□ This course request has not been approved and is returned to you for the following reason(s):

ARC Chair: __________________________ Date: __________
print & sign

Office of the Provost Use Only:
Approved: ____ Not Approved: ____ Cost Center Code (if other than convening group): __________

Provost Signature: __________________________ Date: __________