

**CURRICULUM FORM NUMBER 1**  
**CHICAGO STATE UNIVERSITY OFFICE OF ACADEMIC AFFAIRS**  
**COURSE CHANGE**

TO BE USED ONLY FOR COURSE CHANGES NOT A PART OF A NEW ACADEMIC DEGREE PROGRAM

This form must accompany each request for addition, deletion, suspension of courses or changes in course number, title, credit hours, prerequisites, co-requisites or description. Changes in course number, credit hours, or extensive changes in title or description will require deleting the old course and adding a new course. It shall be the originating department's responsibility to see that steps 1-2 are completed with dates and signatures before submission to the appropriate college curriculum committee AND to notify the Office of Academic Affairs that a curriculum action is being initiated for master-tracking purposes. **NOTE: This form will not be complete without attaching Curriculum Form Number 2. Do not use this form to propose program changes beyond a single course.**

COURSE: \_\_\_\_\_  
Course Prefix & Number Full Course Title

DEPARTMENT: \_\_\_\_\_ CHAIRPERSON: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE CHECK ONE: ADDITION \_\_\_\_\_ DELETION \_\_\_\_\_ CHANGE \_\_\_\_\_ SUSPENSION \_\_\_\_\_

- |    |  |                    |               |
|----|--|--------------------|---------------|
| 1. | Approved by the appropriate academic department:                 | _____<br>Signature | _____<br>Date |
| 2. | New course number assigned (if applicable):                      | _____<br>Signature | _____<br>Date |
| 3. | Reviewed and recommended by the appropriate CCC(s):              | _____<br>Signature | _____<br>Date |
|    | _____<br>(CCC, CTE as needed)                                    | _____<br>Signature | _____<br>Date |
| 4. | Approved by the appropriate college dean(s):                     | _____<br>Signature | _____<br>Date |
|    | _____<br>_____   | _____<br>Signature | _____<br>Date |
| 5. | Approved by the General Education Committee (if applicable):     | _____<br>Signature | _____<br>Date |
| 6. | Approved by the Graduate Council (if applicable):                | _____<br>Signature | _____<br>Date |
| 7. | Approved by the Distance Education Committee (if applicable):    | _____<br>Signature | _____<br>Date |
| 8. | Approved by the University Curriculum Committee (if applicable): | _____<br>Signature | _____<br>Date |
| 9. | Approved by the Office of Academic Affairs:                      | _____<br>Signature | _____<br>Date |

Internal Routing: (Signature and Date of Effective Action)

Distribution List: (Copied on Action)

Registrar: \_\_\_\_\_ (major code assigned)  
 Course Scheduling: \_\_\_\_\_ (entered BANNER)  
 Catalogue Entry: \_\_\_\_\_ (entered catalogue)  
 Evaluations: \_\_\_\_\_ (CAPP/Grad Office)  
 Academic Advising: \_\_\_\_\_ (notification sent)  
 Admissions: \_\_\_\_\_ (notification sent)

Chairperson(s) \_\_\_\_\_  
 Dean(s) \_\_\_\_\_  
 Course Scheduling \_\_\_\_\_  
 Academic Advising \_\_\_\_\_  
 UCCC \_\_\_\_\_  
 Academic Advising \_\_\_\_\_  
 Records and Registration \_\_\_\_\_  
 Evaluations \_\_\_\_\_  
 Faculty Senate \_\_\_\_\_  
**Revised: January 15, 2017**  
**Effective: February 15, 2017**