

# INSTRUCTIONS

## University of Wisconsin Oshkosh

### FORM A COURSE ACTION ROUTING SHEET

(Please Print on Yellow Paper)

If you are creating a new course that will be required in a program or listed in a specific elective list, you will need to prepare a Form C, Academic Program Action Routing Sheet, to accompany the Form A, Course Action Routing Sheet. If the course will be a general elective, no Form C is required.

If this proposal applies to new or revised Plan (Major/Minor/Emphasis/Option/Certification), use **FORM C** (Academic Program Action Routing Sheet)

If this is a Trial Course, also fill out the **TRIAL COURSE ATTACHMENT** (See [http://www.uwosh.edu/provost/curriculum\\_forms/index.php](http://www.uwosh.edu/provost/curriculum_forms/index.php).)

If this proposal applies to General Education, also fill out **GENERAL EDUCATION ATTACHMENT** (See [http://www.uwosh.edu/provost/curriculum\\_forms/index.php](http://www.uwosh.edu/provost/curriculum_forms/index.php).)

Separate forms must be completed for components with different catalog (course) numbers

Check the boxes below that apply to your course. If a new course, only check the "New Course" box and be sure to attach a syllabus.

\_\_\_\_\_ **NEW COURSE:** Complete entire FORM and attach syllabus.

Note that for course revisions you do not need to complete the entire form. You only will complete the sections that apply to the revisions you have checked. Include a brief rationale for the change in the appropriate section below.

If you are **deleting a general education** course, write "GE" on the line in front of Course Deletion.

**COURSE REVISION:** Check all that apply-complete only appropriate section(s)

_____ Catalog Number Change	_____ Convert to U/G (dual level)
_____ Units (Credits)	_____ Course Deletion
_____ Course Title (include 30-char. abbrev.)	_____ Grading Basis
_____ Course Description	_____ Course Component
_____ Prerequisites	_____ Other (describe)

PS course ID
Offering Number
Subject
Course Number

Usually the effective date will be at least one term later than the current term.

**EFFECTIVE DATE:** \_\_\_\_\_ (Term/Year)

List department name, course catalog number, and number of course units (credits). If you are changing the catalog number or units, list the current number AND the new number.

**Department:** \_\_\_\_\_ **Catalog Number:** \_\_\_\_\_ **Units** (Credits Earned) \_\_\_\_\_

Do not skip this step if you are creating a new course or changing the number of an existing course.

**STOP** Before proceeding, call Registrar's Office at 0933 for catalog number verification/approval.

List the course title. If you are changing the course title, list the current title AND the new title.

**Course Title:** \_\_\_\_\_

Only complete this if the Form A is for a new course or a title change.

**30-Character Abbreviation** (for new course or title change): \_\_\_\_\_

*Only complete this if the Form A is for a new course or a description change. NOTE: The prerequisite is NOT part of the course description.*

**Course Description** [to appear in University Catalog (bulletin)]:

*Only complete this if the Form A is for a new course or a prerequisite change.*

**Prerequisites** (if any) [to appear in University Catalog (bulletin)]:

*Only complete this if the Form A is 1) for a new course with variable credits, 2) changing existing variable credits, or 3) changing current credits to variable credits.*

**For Variable Units (credits) per course offering:** Minimum Units (credits) \_\_\_\_\_ Maximum Units (credits) \_\_\_\_\_

*Only complete this if the Form A is for a course that may be taken several times under different titles or under the same title for cumulative credit. If a student can take this class more than once during the semester, please call the Registrar's Office (x0933) for additional information. "Repeatable for credit" as listed here does NOT refer to allowing students to repeat a course in order to improve a grade.*

**Repeatable for Credit?**  No  Yes If yes, maximum total units (credits): \_\_\_\_\_

*Most courses will be for a Letter Grade. Choose Pass/Fail when competency is the indicator of success in a course.*

**Grading Basis:**  Letter Grade  Pass/Fail

*Note that "discussion" should be checked only if the "discussion" component is separate from the "lecture" component. Most "lecture" components include some general discussion. If more than one component is checked, each must be input when scheduling the course. (Note: This is how the course is built and displayed on TitanWeb.)*

**Check which components this course includes (check all lines that apply):**

Lecture  Discussion\*  Independent/Individual Instruction  
 Laboratory/Studio  Field Experience  Seminar/Colloquia

**How many class hours (per week) are assigned to each of the above checked components?**

Lecture  Discussion\*  Independent/Individual Instruction  
 Laboratory/Studio  Field Experience  Seminar/Colloquia

**NOTE: All checked components must be included in scheduling process.**

*These definitions are included to help you decide which of the above components apply to your course.*

**Lecture** – An instructional method in which the instructor presents data and little discussion occurs.

**Laboratory/Studio** – Independent activity by a student with a group under faculty supervision in a room with special equipment.

**Discussion** – Attention of all members to one performance but group interaction occurs frequently. Include problem hours here.

**Independent/Individualized Instruction** – All course-sections with an enrollment of one student. Independent Study, Thesis, Comprehensive Exam, and music lessons.

**Field Experience** – Instruction generally occurs in a non-classroom setting. Sections are determined by the span of supervision of a particular faculty member rather than the meeting time and place. Examples include Student Teaching, Internship, Clinical Experience, and Field Work (where that represents the total contact of the course).

**Seminar/Colloquia** – A group of advanced students at the undergraduate or graduate level studying with a faculty member (or, in the case of colloquia under the leadership of several faculty members) and exchanging the results of their research through discussion, reports, etc.

If the Form A is for a new course that is designed to be a general education course or a trial course, check the appropriate box in the first row and also the appropriate box in the second row. You also will need to complete either a General Education Attachment or a Trial Course Attachment. These may be found at [http://www.uwosh.edu/provost/curriculum\\_forms/index.php](http://www.uwosh.edu/provost/curriculum_forms/index.php). For all other new courses, only check the appropriate box in the second row.

If the Form A is for an existing general education course, check that box. Also, complete and attach a General Education Attachment, [http://www.uwosh.edu/provost/curriculum\\_forms/index.php](http://www.uwosh.edu/provost/curriculum_forms/index.php).

**Type of Course:**  General Education (requires APGES Committee approval)  Trial Course  
 Undergraduate  Graduate  Combined U/G (dual level)

Cross-listed courses have identical course numbers, descriptions, prerequisites, and titles but are offered by different departments. Students only may receive credit for one of the courses. Cross-listed courses require both/all department chair signatures.

**Cross Listed?**  No  Yes If yes, list course(s)

Only complete this for new courses and courses being changed substantially in some way.

**Objectives of course:**

Only complete this for new courses and courses being changed substantially in some way.

**Outline of course content (Attach syllabus. For COLS Interdisciplinary courses include name of instructor and department.)**

Only complete this for new courses and courses being changed substantially in some way.

**Are new resources required?**

Only complete this for new courses and courses being changed substantially in some way. **NOTE:** If this course will be **required** in a program **OR** will be listed on a **specific list of electives**, also complete a **Form C**. If this course will be a **general** elective in your program, no Form C is needed.

**Will this course become a component in an existing program (major, minor, emphasis, option, certification)? If yes, please explain.**

**Course content related to other curricula:**

- Is content of this course a duplication of course material already offered with the department, between departments, and/or between colleges? If so, has the duplication been discussed with the other unit, and what is the rationale for offering both courses?
- Is course to apply to a major, minor, emphasis, option, certification outside the initiating unit? If so, a written statement from applicable department(s) should attest that the course would be accepted in that program.

The blue sheet (final step) for the course will not be generated without the Registrar's signature in the following box. It is a good idea to get the Registrar's signature early in the process.

**Prior to the initiation of the approval process, please contact the Registrar's office at 3007 for consultation about possible impact of proposed changes.**

Registrar: \_\_\_\_\_ Date: \_\_\_\_\_

*Chair and dean signatures signify qualified instructional staff, adequate student demand & facilities, appropriate equipment & materials, consideration of exceptional course fees (above \$20), approval of college/school curriculum committee (if applicable), and communication with other affected units.*

*If you are uncertain which signatures are required for college approval, contact staff in your dean's office. Changes to course numbers, titles, and descriptions when course content does not change, but the new description better describes existing content, may be approved by department chairs and sent directly to the Provost and Vice Chancellor's office.*

**IMPORTANT: ALL SIGNERS MUST ALSO PRINT OR TYPE THEIR NAMES**

**APPROVALS (Please sign and also print or type name)**

Originator (COLS Interdisciplinary courses only): _____	Date: _____
Department Chair(s): _____	Date: _____
Division Chair: _____	Date: _____
Curriculum Comm. Chair: _____	Date: _____
Dean/College: _____	Date: _____
Graduate Studies: _____	Date: _____
APGES Committee Chair (if applicable): _____	Date: _____
APC Committee Chair (if applicable): _____	Date: _____
Provost and Vice Chancellor: _____	Date: _____
Chancellor: _____	Date: _____