



COURSE APPROVAL FORM COVER SHEET

SCHOOL

DEPARTMENT

COURSE ALPHA, NUMBER, TITLE

AUTHOR

DATE SUBMITTED

Check the action to be taken and have the indicated people sign.

- ☐ Course Adoption - all signatories
☐ Course Substantive Revision - all signatories except President

APPROVED BY	NAME	APPROVED	DISAPPROVED	DATE	ACTION*
DEPARTMENT CHAIR		<input type="checkbox"/>	<input type="checkbox"/>		
ADVISORY COMMITTEE/ SUBJECT/INDUSTRY EXPERT		<input type="checkbox"/>	<input type="checkbox"/>		
REGISTRAR	Patrick L. Clymer	<input type="checkbox"/>	<input type="checkbox"/>		
DEAN		<input type="checkbox"/>	<input type="checkbox"/>		
LEARNING OUTCOMES COMMITTEE CHAIR	R. Gary Hartz	<input type="checkbox"/>	<input type="checkbox"/>		
VP, ACADEMIC AFFAIRS	R. Ray D. Somera, Ph.D.	<input type="checkbox"/>	<input type="checkbox"/>		
PRESIDENT	Mary A. Y. Okada, Ed.D.	<input type="checkbox"/>	<input type="checkbox"/>		

* Indicate if the document had no corrections (NC), was approved with minor corrections (WC), or was disapproved and returned back to author (BTA).

This version of the cover sheet facilitates the eventual transition to an all-online curricula approval process.

- C. Conformity of this course to legal and other external requirements. Include articulation agreements, State Voc/Tech requirements, accrediting agency standards, State Board regulations, professional certification or licensing requirements if applicable
- D. Results of course and course guide evaluation.
- E. Program requirements (associate degree, certificate, diploma) served by this course

V. RESOURCE REQUIREMENTS AND COSTS (PENDING AVAILABILITY OF FUNDS)

- A. Resources (materials, media, and equipment) and costs
- B. Personnel requirements (administrative, instructional and support staff) and costs
- C. Facility requirements and costs
- D. Funding source(s)
- E. Impact, financial or otherwise, this course may have on the School/College

VI. IMPLEMENTATION SCHEDULE

- A. Implementation date
* Document must be approved by second week of March to be effective following fall semester or second week of October to be effective following spring semester.
- B. Course Offering: **Fall Only**
Every Year

VII. COURSE DESCRIPTION

- A. Course
Alpha:
Number:
- B. Course Title(s)
Long Title:
Abbreviated Title (20 characters maximum):
- C. Contact Hours and Number of Students
Maximum Number of Students:
Lecture Hours:
Lab Hours (state category 1 or 2):
Clinical:
Other:
Total Hours:
- D. Number/Type of Credits
Carnegie Units: per semester
Semester Hours: per semester
- E. Catalog Description (Moved to Section III. See page 2)
- F. Prerequisite(s)
- G. Co-requisites(s)
- H. Articulation
Secondary Programs/Courses
University of Guam
Others