

## ADD A COURSE FORM (R/O-02/20)

To: Provost & Vice President for A	cademic Affairs		
From: Chairperson/Department		Dat	re:
Provost Use Only:			
☐ Approved ☐ Denied Signature:		D	ate:
Explanation:			
Term: Year:	New Course:	Yes   No	
Course Reference Number:	Subject:	Course Number:	Section:
Course Title:			
Credit Hours: Variable	e Credit: □ Yes □ No	□ Hybrid □ On	line
If course is Special Topics & Problems		·	no/Syllobus
	_		•
Justification for adding this course:			
Enrollment Limit:	Grade Mode: $\square$ N (A,B,C	C,D,F)   B (Credit/No Credit/No Cred	edit)
Start Time:End Time:	Days:	Building:	_ Room:
Instructor:	GSC ID #:		
Starting Date: (Month, Day, Year)	Ending Date: (Month, Day, Year)		
Please attach a list of students w	th their ID numbers wh	o will be enrolling in the	proposed course.
If this is an O	ff-Campus Course please m	ark all that apply below:	
☐ Off–Campus other than HS (TC2)	☐ Dual Credit (DC1)	☐ Taught at a public High	n School (TC5)
☐ Early Entrance (EEP)	☐ Instructor Paid (SCB1	)	
☐ Web Mix-High School & Campus	☐ Instructor Not Paid		