



GRADUATE COURSE UPDATE FORM

To add, delete, or change a graduate course.

Section A: Describe the update. To be completed by the proposer.

ADD

DELETE

CHANGE

NOTE: If course number is changing – old number will be DELETED and new number will be ADDED.

Date: _____ **Date to be effective:** _____

Section B: For Delete or Change.

Course as it now appears in catalog.

Discipline: _____ **Number:** _____ **Complete Title:** _____

Credit hours: _____ **Contact hours lecture** _____ **Contact hours lab:** _____

Complete course description (including any prerequisites):

Section C: For Add or Change.

Course as it now appears in catalog.

Discipline: _____ **Number:** _____ **Complete Title:** _____

Credit hours: _____ **Contact hours lecture** _____ **Contact hours lab:** _____

Complete course description (including any prerequisites):

18-character short title for adding course: _____

(remember to count spaces as part of character field)

Section D: Course details.

Will this course carry a lab or supplemental fee? (If a fee is needed, a separate request for fee approval must be made to the VPAA by November 1st): **Yes** **No**

Is this course repeatable for additional credit? **Yes** **No**

Repetition limitation: _____

Cross-listing recommended: **Discipline** _____ **Number:** _____

(If cross-listing is recommended, the course update for the cross-listing must accompany this request.)

List every major and minor for which this is a newly required course:

Major: _____ **Minor:** _____

(This course update must be accompanied by a program change request for each major or minor indicated.)

Describe the reason for this update: _____

This action should be reflected in the University catalog beginning with the catalog year: _____

Section E: Approving signatures.

Printed Name of Proposer

Signature of Proposer

Date

Printed Name of Graduate Program Head

Signature of Graduate Program Head

Date

Printed Name of Coordinator (CoB)

Signature of Coordinator (CoB)

Date

Printed Name of CoB Curriculum Committee

Signature of CoB Curriculum Committee

Date

Printed Name of College/School Dean

Signature of College/School Dean

Date

Printed Name of Graduate Council Chair

Signature of Graduate Council Rep.

Date

Printed Name of Graduate Studies Dean

Signature of Graduate Studies Dean

Date

Printed Name of VP of Academic Affairs

Signature of VP of Academic Affairs

Date

Submit course update to: Graduate Studies

MB 1208
4901 East University Odessa, TX
79762

Phone: 432-552-2530
Fax: 432-552-3530
Email: gradstudies@utpb.edu

To be completed by the Graduate Studies Office: Reviewer: _____ Input Date: _____
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Required Signatures and Routing of the Course Update Forms

Which signatures are required on the Course Update Form depends upon the College/School. The routing of the form also depends on the College/School.

These forms must be **signed by** the following in this order:

- Proposer
- Graduate Program Head (College of Arts and Sciences; School of Education)
- Coordinator (School of Business, only)
- School Curriculum Committee (School of Business, only)
- College/School Dean
- Chair, Graduate Council
- Dean of Graduate Studies
- Vice President for Academic Affairs

However, the **routing** of the form for tracking purposes is in the following order:

- Proposer
- Graduate Program Head (College of Arts and Sciences; School of Education)
- Coordinator (School of Business, only)
- Dean's Office to log in (Associate Dean, School of Education, only)
- School Curriculum Committee (School of Business, only)
- College/School Dean
- Graduate Studies Office to log in
- Chair, Graduate Council
- Dean of Graduate Studies
- Vice President for Academic Affairs
- Registrar, Dean, and Dean of Graduate Studies