

CALIFORNIA STATE UNIVERSITY, EAST BAY  
**NEW COURSE REQUEST**

Quarter: \_\_\_\_\_ Year: \_\_\_\_\_ Catalog: \_\_\_\_\_ Date Submitted to APGS: \_\_\_\_\_  
(First Quarter/Year of Offering) (Catalog in which new course will first appear)

*The CSU Accessible Technology Initiative requires that all instructional materials be available in accessible formats. Departments will assure the instructional materials for the course will be accessible.*

1. **DEPARTMENT** (Name of department or program which offers the New Course): \_\_\_\_\_

2. **ALPHABETICAL PREFIX (ALL CAPS):** \_\_\_\_\_ **COURSE NUMBER:** \_\_\_\_\_  
[Check Course Inventory to make sure number has not yet been used. Check with Department chair, Dean/Associate Dean, or college Curriculum Coordinator. Course numbers may only be used once, even if course is no longer offered.]

**FULL TITLE** (in Catalog): \_\_\_\_\_  
[maximum of 100 spaces]

**SHORTENED TITLE FOR CLASS SCHEDULE** (if full title is over 30 spaces): \_\_\_\_\_  
[maximum of 30 spaces]

**UNIT VALUE** of course: \_\_\_\_\_  
[Number of units each student will earn for passing this course. Component Units.]

3. **CATALOG DESCRIPTION** (Course Content. 40 words maximum):

a) Prerequisite(s): \_\_\_\_\_  
(e.g. COMM 1000; Consent of instructor; at least a 2.0 GPA.)

b) Co-requisite(s): \_\_\_\_\_  
(e.g. Concurrent enrollment in BIOL 1003.)

c) Credit Restrictions :  Yes \_\_\_\_\_  No  
(e.g. Not for biology major or minor credit.)

- Is this course replacing another course in your department where both can be considered equivalent for academic renewal purposes?  Yes  No

*(If yes, a Course Discontinuance Request for the current course must be submitted along with this New Course Request. Also, a credit restriction must be added to the New Course Request that states: Not open to those with credit for XXXX 1234.)*

d) Repeatability:  Yes \_\_\_\_\_  No  
(Total Units student can earn. E.g., Repeatable for a maximum of 12 units, or, May be repeated for credit for a maximum of 8 units when content varies.)

e) If the answer to d) above is yes, can students register for multiple sections of this same course in the same quarter?:  
 Yes  No

- f) Cross-listing:  Yes  No  
 ▪ If yes, list primary and secondary departments. Primary: \_\_\_\_\_ Secondary: \_\_\_\_\_  
 (A New Course Request must be submitted for each of the two departments. Cross-listed courses are those that are identical, except for the course prefix.)
- g) Dual-listing:  Yes  No  
 ▪ (If yes, list the upper-division course number and title if this new course is at the graduate level or list the graduate course number and title if this new course is at the upper-division level. If both the upper-division and the graduate level courses are being proposed at the same time, a New Course Request form must be submitted for each of the two courses.)

Upper-division or Graduate level: Course # and Title \_\_\_\_\_

- h) Miscellaneous Course Fee:  Yes. Fee amount: \$ \_\_\_\_\_  No  
 (If Yes, approval must be obtained from the Campus Fee Advisory Committee, which is handled by the Office of the VP, Administration and Finance. Note: all miscellaneous course fees under \$50 are covered by the A2E2 fee paid by students.)
- i) Grading Pattern:  ABC/NC  CR/NC only  A-F or CR/NC (student choice)  A-F only
- j) Hours/Week of Lecture: \_\_\_\_\_ (If no activity or lab, entire unit value from #2 above is placed here.)  
 Non-Activity/lab units: \_\_\_\_\_ (If there is an activity or lab component, then list only the non-activity/lab units here.)
- k) Hours/Week of Activity or Lab (if applicable): \_\_\_\_\_  
 Activity/Lab units: \_\_\_\_\_ (If there is an activity or lab component, then list only the activity/lab units here).  
 If no activity or lab, indicate "None": \_\_\_\_\_
- l) Taught entirely on-line, on-ground, or hybrid (both):  On-line  On-ground  Hybrid (both online and on-ground)  
 If the answer is on-line or hybrid, also respond to the additional three questions below:
- i. Describe the strategies for teaching this course either in an on-line or hybrid format. (Discuss the instructional methods for offering the course(s) content in an online or hybrid format)

- ii. Describe the experience, support and/or training available for the faculty members who will teach this online or hybrid course. (Discuss how you will ensure that faculty will know how to teach online or in a hybrid format.)

- iii. Assessment of online and hybrid courses. (Discuss how your department will assess the quality of the online and/or hybrid instruction to ensure it is equal or superior to your on-ground instruction). **Note: Assessment of learning is NOT addressed through student evaluations.**

- m) Offered on state-support or self-support:  State-Support  Self-Support

4. **COURSE INVENTORY DATA**

*(All information needed to complete #4 can be found in Appendix B, Course Classification System and Faculty Workload Formula. Once you decide on the Instructional Format, the remaining information is based on the corresponding Course Classification Number and falls neatly into place. If the course contains an activity or lab component, in addition to a lecture, discussion, or seminar component, be sure to list both components and indicate the appropriate hours/week in “j” and “k” above.)*

<b>CSU Course Classification System and Faculty Workload Formula</b>	<b>First Component</b>	<b>Second Component</b>
a. Instructional Format		
b. Course Classification Number		
c. Class Hours/Week [Instructor Contact Hours]		
d. Student Credit Units [Component units/Units earned]		
e. Workload K-factor [based on CS#]		
f. Weighted Teaching Units [component units X K-factor; d X e = f]		
g. Normal Limit/Capacity [ <i>based on CS#. Note: Courses approved by the GE Subcommittee of CIC to satisfy GE Area C4 or D4 must have an enrollment capacity of 40. This maximum capacity is temporary and will again be reviewed in 2012.</i> ]		

5. **GENERAL EDUCATION-BREADTH REQUIREMENT(S), U.S. HISTORY-INSTITUTIONS REQUIREMENT, UNIVERSITY WRITING SKILLS REQUIREMENT** to be satisfied.  Yes  No

(If yes, list Area and Subarea, if appropriate for GE and Category for the Code. Refer to the GE Chapter in this manual for an explanation of the procedure for getting this course approved for GE or the Code Requirement. Refer to the University Writing Skills Chapter in this manual for an explanation of the procedure for getting this course approved for the UWSR.)

6. **JUSTIFICATION FOR/PURPOSE OF** the proposed new course: [Why does this course need to be added? Will this course be used in one of your existing majors, options, minors, or certificates? If so, which one and how? Will the major, option, minor, or certificate need to be revised as a result of the addition of this course?]

7. List of all **Student Learning Outcomes (SLOs)** for this new course.

8. **RESOURCE IMPLICATIONS:** (With the addition of this course, is there a need for additional student fees or other resources such as faculty, facilities, equipment, and/or library resources that will not be covered by the department budget.)

9. **CONSULTATION** with other affected departments and program committee:

- a) The following **department(s)** has (have) been consulted and raise **no objections** (*If there were no objections to this curriculum request after listing it on the Curriculum Sharepoint site for five working days, type in the following: "All Academic Departments and Programs at CSUEB were consulted using the Sharepoint Curriculum site and there were no objections."*)

- b) The following **department(s)** has (have) been consulted and **raised concerns** (*If there were unresolved objections to this curriculum request after listing it on the Curriculum SharePoint site for five working days, indicate the objecting department or program below, along with the specific concern. If there were no unresolved objections, type in "None."*):

10. Certification of **DEPARTMENT APPROVAL** by the chair and faculty.

Chair: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Print Department Chair's name here. Department Chair shall sign a hard copy for the College Office files)*

11. Certification of **COLLEGE APPROVAL** by the dean and college curriculum committee.

Dean/Associate Dean: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Print Dean or Associate Dean's name here. A hard copy shall be signed for the College Office files.)*