**Proposal for a New or Revised Common Course Prefix, Number, Title, and Course Description**

There are 2 parts to this form:

* [Part 1](#part1) is to be filled out by the **Regents’ Advisory Committee (RAC)** proposing the course.
* [Part 2](#part2) is to be filled out by the **Council on General Education**.

**Part 1. To be filled out by the committee proposing the course.**

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| **Note:**  This form and all ancillary information should be filled out in Word and saved as a single document using the following file-naming convention:UniqueAbbreviationForYourRACCoursePrefixCourseNumber for example **A.docx**Please email your completed proposal (as an attachment) to melanie.largin@usg.edu. **Please do not delete any parts of this document.** |

1.  **Advisory Committee:**

1. **Course Subject** (e.g., philosophy):
2. **Course Prefix and Number** (e.g., PSYC 1101):
3. **Course Title** as it appears (or will appear) in academic catalogs:

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|  |

1. **Lecture Hours – Laboratory Hours\* – Credit Hours** (e.g., 3-0-3):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

\* In determining credit hours, 2 – 3 laboratory hours are usually equivalent to one credit hour. So a course with a 2 hour lab would be 3-2-4; a course with a 3 hour lab would be 3-3-4.

1. **Provide a description of the course** in the box below that would be appropriate for inclusion in institutional academic catalogs:

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1. What Core IMPACTS area(s) is this course likely to be appropriate for?

Please provide the following contact information for the person submitting the proposal. This should be either the Chair of the RAC submitting the proposal:

|  |  |
| --- | --- |
| **Name of Person Submitting Proposal:** |  |
| **Email Address:** |  |
| **Phone Number:** |  |
| **Mailing Address:** |  |

Please fill in the **Course Description Template** below, if appropriate. This should be generic information that will apply to ALL sections of the course, not just to courses taught by a particular instructor or institution. Please do **not** attach a complete syllabus.

**Course Learning Outcomes**

Provide a bulleted list of the course learning outcomes.

* [Start the bulleted list here.]

**Course Content**

Provide a topical outline demonstrating the breadth and depth of the course. Please be as comprehensive as possible within the limits of an outline.

[Insert outline here.]

**Part 2. To be filled out by the System Liaison for the Council on General Education.**

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| **Course Prefix, Number, & Title:** **Regents’ Advisory Committee:**   |

1. Date the review by the Council on General Education was conducted:

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| --- |
|  |

1. What action did the Council on General Education take with respect to this proposal?

|  |  |
| --- | --- |
|  | Approved |
|  | Denied |
|  | Withdrawn |
|  | Tabled |

1. Please enter any comments from the Council on General Education in the box below.

|  |
| --- |
| Insert text here. Box will expand as needed. |

1. Please provide contact information for the System Liaison to the Council on General Education.

|  |  |
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| **Liaison name:** | Barbara L. Brown |
| **Liaison daytime phone number:** | 404-962-3107 |
| **Liaison email Address:** | Barbara.Brown@usg.edu |

This form was last updated on 12/28/2023.