

Southwest Texas Junior College  
Curriculum Committee Submission Form

Requested by:

Division:

Department:

**Submission Date:**

**Term:**

**Year:**

Subject of Proposal (Please select one of these items below)		
<b>Course Change</b> (Section 1) <input type="checkbox"/> New <input type="checkbox"/> Revision <input type="checkbox"/> Inactivation <input type="checkbox"/> Reactivation	<b>Program Change</b> (Section 2) <input type="checkbox"/> New <input type="checkbox"/> Revision <input type="checkbox"/> Inactivation <input type="checkbox"/> Reactivation	<b>Miscellaneous</b> <input type="checkbox"/> Textbook Change (Section 3) <input type="checkbox"/> Policy – (Section 4) Attach policy proposal <input type="checkbox"/> Site Changes (Section 5) <input type="checkbox"/> Catalog Change – Attach current proposed text memo. Syllabus Change - Attach proposed text memo: <input type="checkbox"/> Other:

1. Course Change			
Rubric (e.g., BIOL)	Course Number	Course Title	CIP / Approval Number
Semester Credit:	Lecture Hours:	Lab Hours:	External Hours:
<input type="checkbox"/> ACGM	<input type="checkbox"/> WECM	<input type="checkbox"/> UNIQUE NEED	
When will this change take effect?	Term:	Year:	
Proposed Course Description			
TSI Requirements:		Prerequisite:	
Co-requisite:			
Fee Amount and Fee Type:			
Which program(s) will course change affect?			
Why is this course change needed? Please provide detailed rationale.			
Is Master Syllabus attached? <input type="checkbox"/> <b>Changes will not be considered until master template is updated.</b>			

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**2. Program Change**

Program Title ( as it will appear in catalog)			
Major Code:	CIP Code /Approval Number:	Type of Program: <input type="checkbox"/> Academic <input type="checkbox"/> Technical <input type="checkbox"/> Workforce Education	
When will this new program begin?	Term:	Year:	Site(s) (also complete section 5)
Describe program addition / revision:			
	<u>Administrator</u>	Initial	Date
<input type="checkbox"/> Needs assessment performed.	Dean	_____	_____
<input type="checkbox"/> There is a need for the program.	VP of Academic Affairs	_____	_____
<input type="checkbox"/> Program coordinator is assigned.	VP of Academic Affairs	_____	_____
<input type="checkbox"/> SACSCOC Substantive changed addressed.	VP of Academic Affairs	_____	_____
<input type="checkbox"/> Approved budget is attached.	VP of Academic Affairs	_____	_____
<input type="checkbox"/> THECB application is attached.	Dean	_____	_____
<input type="checkbox"/> Catalog changes are attached.	Dean	_____	_____
Comments:			

**3. Textbook Change**

Program Title as it appears in catalog:			
Rubric & Course Number :	Adopted (MM/YY):	Proposed for Fall:	
Title of Current Book:			
Author:	Publisher & Address:	ISBN:	Number of Years this book has been used:
Title of New Book:			
Author:	Publisher & Address:	ISBN:	
Rationale for making change at this time:			

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**4. Policy Change** (Please select one of the options below)

<input type="checkbox"/> New	<input type="checkbox"/> Revision	<input type="checkbox"/> Deletion
Policy Title:	Source:	Page Number:
Why is this policy change needed?		
<b>Attached proposed policy change.</b>		

**5. Site Change** (please select one of the options below)

<input type="checkbox"/> New Site	<input type="checkbox"/> Site Status	<input type="checkbox"/> Site Deletion
Name of site:	Start Date:	
List all courses (e.g., BIOL 2401) or describe change to site:		

\_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Faculty or Administrator

\_\_\_\_\_ Date: \_\_\_\_\_  
Division Chair

\_\_\_\_\_ Date: \_\_\_\_\_  
Dean

\_\_\_\_\_ Date: \_\_\_\_\_  
Vice President

**Curriculum Committee Action: Recommendation:**     Yes     No

Curriculum Committee Chair: \_\_\_\_\_

Date: \_\_\_\_\_

President / Cabinet Rep: \_\_\_\_\_

Date: \_\_\_\_\_

President (New Program) \_\_\_\_\_

Date: \_\_\_\_\_

Attach copy of Board Minutes showing Approval