



Graduate Course Approval Form

New, Change, or Discontinuation

(USF Tampa courses ONLY)

Prefix and Number:		Title:	
Course Type (choose one)	<input type="checkbox"/> New Course	<input type="checkbox"/> Course Change	<input type="checkbox"/> Course Discontinuation
Initiating Faculty Name:		Faculty Email:	
Faculty College:		Faculty Department:	
Associated Major(s)/Concentration(s)/Certificate(s):			
Core* or Elective?			

**If the course is required (core), revised catalog copy will be required for Graduate Council review.*

Follow the guidelines at: <http://www.grad.usf.edu/curriculum-nav.php>.

Complete:

- the Graduate Course Approval Form (this form)
- the online course proposal form at <https://www.systemacademics.usf.edu/proposals>
 - **New Course Proposal Form:** <https://www.systemacademics.usf.edu/proposals/course/course-step1>.
 - **Course Change Proposal Form:** <https://www.systemacademics.usf.edu/proposals/course/course-change-step1>.
 - **Course Discontinuation Proposal Form:** <https://www.systemacademics.usf.edu/proposals/course/course-discontinuation>.
- the catalog copy showing revisions as a result of this course approval/change. To get a copy of the catalog in Word, email cdh@usf.edu noting which major/concentration/certificate is needed.

Faculty Agreement:

- I confirm that the course submitted into the Course Proposal System is the final version approved by my college/department.
- I confirm that I have checked the Statewide Course Numbering System (SCNS) and USF does not currently offer this course.
- I confirm my understanding that once approved the course syllabus must comply with the Provost's Course Syllabus Policy (<https://www.systemacademics.usf.edu/proposals/resources/syllabus-guidelines>)

There is a Temporary Suspension of Curriculum Processing in place except for the following situations. Select the one(s) that apply:	
<input type="checkbox"/>	Course revisions to align prerequisites and/or corequisites
<input type="checkbox"/>	New course proposal for replacement of Special Topics course or creation of a major core course
<input type="checkbox"/>	Changes required by a specialized accreditor and/or a governing body

APPROVALS	Name	Signature	Action	Date
Initiating Faculty			Requests Approval	
Department Chair			<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> Comments attached	

Concurrence* (please check one)

- Not Applicable – I confirm that this course does not impact or is not offered by other departments/programs, so no concurrence is needed.
- I confirm that I have researched potential areas of concurrence across the USF System and have notified those Institutions/Departments of this proposed course action – these areas are listed below (please check applicable box(es) and sign)

CONCURRENCE	Signature	Action	Date
Concurrence*	Dept.:	<input type="checkbox"/> Concur <input type="checkbox"/> Doesn't Concur <input type="checkbox"/> Comments attached	
	Chair:		

COLLEGE APPROVALS	Name	Signature	Action	Date
School Committee Chair			<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> Comments attached	
College Committee Chair			<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> Comments attached	
USF Health, Sr. Associate Dean	Gretchen Koehler		<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> Comments attached	
College Dean or Designee			<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> Comments attached	