The Graduate School

Kansas State University

PROPOSED GRADUATE COURSE OR COURSE CHANGE

Submit 1 copy to the Graduate School. Use Continuation Sheets as needed.

TO: Graduate Council Date Submitted: _____

The course or change proposed below was approved by the Graduate Faculty in (dept)_____ on _____, 20___, and by the Curriculum Committee of the College on _____, 20___.

_____ _____
Signature, Dept. Head Signature, Dean of College

1. Dept: Proposed Number: Credit Hours:
   Semesters offered:
   Title:

2. For the following, complete only items 3 and 4:
   - ☐ Title change
   - ☐ Minor Modification
   - ☐ Number Change (from _____ to _____)
   - ☐ Drop

   For the following, complete items 3 *through* 7:
   - ☐ New Course
   - ☐ Older course to be dropped, if any __
     _____
     _____

3. Brief outline of course; or, for changes, description of old and new titles or numbers, or explanation of modification.

4. Catalog Description typed exactly the way it will appear in the *Graduate Catalog*, including prerequisites and semesters offered:

(Continued on back)

SUBCOMMITTEE ACTION		GRADUATE COUNCIL ACTION	
Approved ☐ Vote:	Rejected ☐ Vote:	Approved ☐	Rejected ☐
Signature:		Signature:	
Date:		Date:	

5. Faculty member(s) responsible for course:

Name	Highest degree	Graduate Faculty? Yes No

Qualifications

Name	Highest degree	Graduate Faculty? Yes No

Qualifications

6. List courses in other departments which can normally be expected to deal with similar or closely related content either in whole or in part. Contact the department head, and then the instructor, and submit the documentation regarding this course.

Department	Number & Title of Similar Course, if any	Response of Dept. to Proposed Course	Date of Consultation

7. State briefly the reasons for the proposed course and how it fits into the curriculum.

8. Other comments

FOR OFFICE USE ONLY: ___ recorded on database ___ on agenda ___ copies to subcommittee ___ copy to departmentgrdcours.0399