



COMMITTEE ON COURSES OF INSTRUCTION
ACADEMIC SENATE-BERKELEY
COURSE APPROVAL FORM
TO REQUEST COURSE
MODIFICATION, APPROVAL, OR WITHDRAWAL

Department	
Course Number	
Date Submitted	Effective Term (e.g., Fall 2009)

Course Title

Abbreviated Transcript Title (19 spaces maximum)	Grading (Letter, P/NP, S/U, IP)	Units	Offered (F, Sp, Su)
--	---------------------------------	-------	---------------------

Courses that will restrict credit	Instructor(s)
-----------------------------------	---------------

Prerequisites

Duration of Course (check all that apply)	Format (e.g., 3 hrs LEC + 1 hr DIS per week) (fill out for each term course will be offered)	TIE Format	Estimated Total Number of Required Hrs. of Student Work Per Week
15 weeks			
10 weeks Fall/Spring Summer			
8 weeks Fall/Spring Summer			
6 weeks Fall/Spring Summer			
Other: _____ week(s) Fall/Spring Summer			

Course Description (500 space limit; additional text will be truncated)

Check as many as apply. New courses or substantial changes should have complete syllabus attached.

New course	Change course title	Change prerequisite		
Withdrawal of course (last offered: _____)	Change course description	Change grading option		
Special purpose course to be offered only once	Change unit value	Other (Explain in Remarks)		
Summer session <i>only</i> course	Change instructional format	<table border="1"> <tr> <td>Course repeatable for credit?</td> </tr> <tr> <td>Yes* No</td> </tr> </table>	Course repeatable for credit?	Yes* No
Course repeatable for credit?				
Yes* No				
American Cultures course	Change course number (from _____ to _____ ; last term offered: _____)			
Restoration of course (previous course # _____; last term offered: _____)				

Remarks (or attach separate sheet)

Chair, Administrating Department	Committee on Courses of Instruction	Approval Date
Dean of College, Division, or School (if required)		