



Office of the Registrar

UNIVERSITY OF COLORADO **BOULDER**

COURSE REVISION FORM

Revision to be effective for fall term: _____ (A catalog year begins in fall term and ends in summer term)

- SUBJECT AREA _____
- CATALOG (COURSE) NUMBER _____
- CURRENT TITLE _____

1) Change in catalog course description (cannot exceed 60 words and should begin with a verb):

2) Change in Catalog (Course) Number from: _____ to: _____

3) Change in Course Title (include both Short Course Title and Long Course Title):

a. Short Course Title (prints on Transcripts, Study Lists, and Schedule of Classes; cannot exceed 29 characters): _____

b. Long Course Title (prints in Catalog; cannot exceed 60 characters):

Note: students will not receive credit for this course with the new course number or course title if they have already taken the course, unless repeat credit is requested under item 9 or a new course proposal is submitted.

4) Course Pre-requisite NOTE: will be coded and enforced.

a. Subject Area _____ Catalog (course) Number _____

b. Subject Area _____ Catalog (course) Number _____

c. Subject Area _____ Catalog (course) Number _____

5) Course Co-requisite NOTE: will be coded and enforced.

Subject Area _____ Catalog (course) Number _____

6) Course Restrictions, (i.e., restricted to juniors/seniors; restricted to majors): NOTE: will be coded and enforced.

a. _____

7) Change in units (credits): Current units: _____ New units: _____

8) Change in variable units (credits): Current min/max units _____ New min/max units: _____

9) Repeatable for credit: Total units (credits) allowed _____

10) Allow multiple enrollment in term:

11) Component change to:

a. Activity Type:

b. Component Addition: _____

Designate which component is graded/primary

12) Course to be cross-listed (two different Subject Areas (departments)):

a. Subject Area: _____ Catalog (Course) Number: _____

13) Course to be double-listed (within Subject Area (department), i.e., 4000 and 5000 level course)

a. Catalog (Course) Number: _____

14) Course is similar to:

a. Subject Area: _____ Catalog (Course) Number: _____

15) Closure course beginning fall term _____

16) Reactivate beginning fall term _____

17) Course topics (cannot exceed 29 characters): _____

18) Grading Basis:

Other: _____

Reason for making revision(s):

Request prepared by: _____ Date: _____

Approved by Department: _____ Date: _____

Approved by College Committee: _____ Date: _____

Approved by Dean of College: _____ Date: _____

Approved by Graduate School: _____ Date: _____

RETURN TO: Appropriate College or School's Dean's Office for processing

Revised 6/14