CCCNS Course Template Submission – General Ed

**Submitted by (course author)****College****Date**

Steps for approval:

1. Reviewed by College Curriculum Committee
2. Submission by CAO to System Office
3. Posted to Bulletin Board for 30 day review
4. Reviewed by State Faculty Curriculum Committee
5. Reviewed by Chief Academic Officers
6. Approved changes posted to Common Course Numbering System

Please see the [FAQ](https://www.cccs.edu/wp-content/uploads/documents/FAQs-CCCNS-Course-submission-template-gen-ed.pdf) for additional information, instructions

# New Revision of existing course

# What is being revised?

Change prefix or number this is a NEW course

Change credit hours this is a NEW course

Change course title

Prior title

Change classroom hours

Prior hours

Change catalog description

Change course learning outcomes

Change topical outline

Course archive

Course prefix      Course number

# COURSE INFORMATION – required, all submissions

**Course prefix**       **Course number**

**Course title (limit 30 characters)**

**Course long title**

**CIP code (must enter)**       CIP cost assigned at System

**Credits min**       **Credits max**

**Total classroom hours**

LEC/LAB/LLB, etc breakdown\*must be completed\*

**Schedule type**

**LEC** Lecture(1:1) **LAB** Lab(2:1) **LLB** Lecture/Lab Combo(1.5:1) **LEL** Academic Lec & Lab Combo (1:1 LEC /2:1 LAB)

**INT** Internship(3:1) **CLI** Clinical(3:1/2:1) **PRA** Practicum (2:1) **IND** Independent Study(0.75:1)

**Other** (please list)

**Course repeat limit (choose one)** 1 99

**Grading method (standard is the default; may choose additional)**

G Standard Grade F Pass/Fail U Satisfactory/Unsatisfactory

**Course attribute**

**GEN** General Ed NON Gt **DEV** Developmental Course

**Pre-Requisite/Co-requisite**

Course prefix       Course number

Course Catalog description (max 75 words)

This course…

# COURSE LEARNING OUTCOMES

IF more than 20 required course learning outcomes are required (justification):

**Required Course Learning Outcomes** (must be completed)

Recommended Course Learning Outcomes (this may be left blank)

# TOPICAL OUTLINE

**Required Topical Outline (must be completed)**

Recommended Topical Outline (this may be left blank)