

**PORTERVILLE COLLEGE
CURRICULUM COURSE REVIEW UPDATE**

Name of Division: _____ Contact Person: _____

[Note: The information in this area will repeat on all pages.]

Please submit this form to the Curriculum Committee **before** adding the course to eLumen when proposing a new Course. Once the form is received, the course will be added as a discussion item at the next available Curriculum Committee meeting.

Please include this form as an attachment when submitting the course for final evaluation in eLumen.

All new Courses must be directly tied to the Institutional Goals, Strategic Plan, Educational Master Plan, General Education Outcomes, and Institutional Outcomes as appropriate through the Division Program Review.

Is this new Course addressed in your current Program Review: YES _____ NO _____

If YES, please attach the appropriate sections.

If NO, please complete the attached New Course documents.

PORTERVILLE COLLEGE
CURRICULUM COMMITTEE

COURSE ADDITION

The items enumerated below are to assist you in filling out the Course Addition Form. Short descriptions and examples have been given to guide you in completing this form

ATTACH COURSE OUTLINE

1. INITIATED BY

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InstructorDivisionDepartment

2. Subject Number Title
Units Lecture Hours Lab Hours
Computer Assisted Instruction Distance Learning

3. CONTENT REVIEW

If a prerequisite, corequisite or recommended preparation is listed below, content review forms (entrance, exit and/or corequisite) must be included with this proposal. Forms are available on the web under the Curriculum Committee tab. **ALL INFORMATION BELOW MUST BE IDENTICAL ON THE ATTACHED COURSE OUTLINE.**

Prerequisite:

Corequisite:

Recommended or Advisory:

4. CATALOG DESCRIPTION

Provide a draft of the course description as you wish it to appear in the catalog. **This must match the attached course outline.**

5. REASON FOR ADDITION

Provide a concise statement as to why the course is being added. Be clear regarding the evidence of need for the addition of this course (e.g., articulation with other colleges/universities, student demand, recommendation from advisory committee or external accreditation review, campus program review).

6. CHECK ANY OF THE FOLLOWING CATEGORIES FOR WHICH THIS COURSE WILL BE USED.

- a. None
- b. AA/AS Degree
- c. Associate Degree for Transfer (ADT)
- d. Area of Emphasis
- e. Certificate of Achievement
- f. Certificate of Proficiency

7. **GENERAL EDUCATION:** Forms for the appropriate Associate Degree area are available from Instructional Operations. CSU and IGETC requests approved by the Curriculum Committee are submitted each December for review by the specific four-year system office.

- a. Not applicable
- b. General Education – Associate Degree
- c. General Education – Cal-GETC

Area	<input style="width: 90%;" type="text"/>	Section	<input style="width: 90%;" type="text"/>
Area	<input style="width: 90%;" type="text"/>	Section	<input style="width: 90%;" type="text"/>

8. THIS COURSE MEETS OR EXCEEDS STATE TITLE 5 STANDARDS AND CRITERIA FOR COURSES AND CLASSES (Check one)

- Credit course applicable as units to the associate degree (within degree/certificate requirements or elective toward graduation) – Title 5: Section 55002
- Credit course not applicable as units toward an associate degree – Title 5: Section 55002
- Basic skills (when designated as non-degree credit; courses in reading, writing, computation, and ESL) – Title 5: 55002/55000(j)
- Noncredit course (offered for zero units) – Title 5: Section 55002

9. Porterville College CROSS-LISTING COLLABORATION AND LETTER OF INTENT

Cross-listed Yes No

If yes, please list cross-listed course(s)

Similarity in course content in another department Yes No

If yes, please list similar course

The original Letter of Intent, with sign off by the affected department at Porterville, must be included with this proposal. **The Curriculum Committee will not review any proposal that affects any division or department at Porterville unless a completed Letter of Intent is on file.** Please meet and collaborate with the appropriate chair or coordinator when this course modification affects another program or certificate or if this course is to be cross-listed at Porterville.

Date sent Date returned

10. DESCRIBE ANY FISCAL IMPACT THIS ADDITION WILL HAVE ON THE DEPARTMENT, COLLEGE AND/OR DISTRICT: Address significant changes in staffing, facilities, equipment, supplies, learning resources or state reimbursement (e.g. loss of eligibility for basic skills, matriculation, and/or other categorical funding). Example: Adding a component of computer assisted instruction to a class could mean a change in identification of facilities, the need to purchase computers and software and the need for additional staff.

11. VOTE OF DEPARTMENT

Indicate the date that the department met to consider the curriculum proposal, the number of full-time faculty members in the department, the number voting and the number absent at the time the vote was taken.

Date of meeting Number of full time members in department

Yes No Abstaining Absent

12. SIGNATURES

I have reviewed this form for accuracy and completeness and recommend this course addition.

Department Chairperson/Coordinator

Date

Dean

Date

13. FOR CURRICULUM CHAIR and VP OFFICE USE ONLY:

STAND-ALONE COURSE APPROVAL

Yes No

This course addition meets the state Chancellor's Office regulations and guidelines requiring state approval as a stand-alone course outside of a program.

Curriculum Chair/VP

Date

Curriculum Committee: