COURSE REVISION FORM

BOROUGH OF MANHATTAN COMMUNITY COLLEGE
The City University of New York
Curriculum Proposal
COURSE REVISION

1. Name of Department: _____

2. Name and Number of course: _____

3. ☐ This course is being withdrawn. (Go to 5)

4. ☐ Course revised. Check appropriate items.

☐ Change course number from _____ to _____

☐ Change course title from _____ to _____

☐ Change course hours from _____ to _____

☐ Change course credit from _____ to _____

☐ Change basic skills requirements from _____ to _____

☐ Change prerequisites from _____ to _____

☐ Change co-requisites from _____ to _____

☐ Change course description. Attach a copy of old and new description.

☐ Pathways Common Core Category: Select one if submitting for Pathways approval

☐ Other (Specify) _____

5. Reason(s) for change(s): _____

6. Date effective: Fall 2024 _____

7. Attach justification that the course revision reflects the goals for all curricula passed by Faculty Council in May, 1988

8. Attach justification that the course revision reflects the General Education goals for all curricula passed by Faculty Council in May, 2006.

9. Attach department(s) minutes approving this proposal.

Signatures

1. _____
Department Chairperson or Program Director Date

2. _____
Scheduling Officer (Advised as to Course Code) Date

3 _____
Academic Affairs Administrator (Advised as to format) Date

4. _____
Chairperson of Curriculum Committee Date
(After the approval of the Curriculum Committee)