

UNH - Manchester Course Approval Form (CAF)

Proposing Faculty Member and Program: _____

Is this a new course proposal or are you proposing changes to an existing course? If a new course, please include your master course outline or a complete syllabus.

New

Changes

Delete

Proposed Course Number and Title: _____

Existing Course Number and Title: _____

Proposed Course Credits: _____ Existing Course Credits _____ Credit/Fail: Yes No

Proposed Prerequisites/ Co-Requisites _____

Repeatable: Yes No If yes, number of times _____

Discovery Program: Category: _____ Currently approved? Yes No
Plan to apply? Yes No

Writing Intensive: Currently approved? Yes No Plan to apply? Yes No

Associate Dean Review for Duplication

Associate Dean	Date

Impact on other programs. If no impact is expected on other programs, check here:

Identify the program(s) affected and the program coordinator contacted.

Type in the name of the program coordinators contacted

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STUDENT SUPPORT SERVICES: If you are proposing a new course, you must discuss it with staff in the following four areas. For changes to existing courses, contact staff in these areas as appropriate. Please indicate who you contacted. For your convenience, email addresses are included in hyperlinks.

Academic Technology: _____ Type in the name of the person contacted
If you plan to use Zoom as a primary delivery method in your course, please contact Sean Embree in IT to discuss technology needs & support. Check this box to indicate you have completed this step.
Library: _____ Type in the name of the person contacted
CAE: _____ Type in the name of the person contacted
Internship & Career Planning: _____ Type in the name of the person contacted

Approval e-Signatures

Proposing Faculty	Date

Department Chair	Date

ARCC Chair	Date

Dean	Date