



**University of Arkansas at Little Rock**  
**Curriculum Change Form—New Course or Course Changes/Deletions**  
 See Detailed Instructions at [ualr.edu/provost/curriculum-change-process/new-courses-course-changes](http://ualr.edu/provost/curriculum-change-process/new-courses-course-changes).

<b>Log #</b> (Provost Office use only)
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**Signature Page for Curriculum Change Form**

*TIP: Right-Click on the form signature fields to sign.*

Approval Process					
1. Department Chair/School Director Signature		Date (mm/dd/yyyy)	5. Graduate Council Chair Signature		Date (mm/dd/yyyy)
2a. College Curriculum Committee Chair Signature		Date (mm/dd/yyyy)	6. Graduate School Dean Signature		Date (mm/dd/yyyy)
Signature (If Applicable)					
2b. Grad. College Curriculum Committee Chair Signature <i>(i.e. in cases of dual-listed courses or early entry programs)</i>		Date (mm/dd/yyyy)	7. Provost Signature		Date (mm/dd/yyyy)
3. College Dean Signature		Date (mm/dd/yyyy)	8. Chancellor Signature		Date (mm/dd/yyyy)
4. Undergraduate Council Chair Signature		Date (mm/dd/yyyy)	9. CORE Course		
			Is this course listed in the University Core?      Yes      No		
			<i>If yes, after UGC approval, Provost Office will forward this form to the Council on CORE Curriculum for approval.</i>		
(PROVOST OFFICE USE ONLY) - Current		Course Information		(PROVOST OFFICE USE ONLY) - FOR BANNER/DEGREE WORKS	
a. Current Subject Alpha Code (e.g., RHET)	b1. Current UG Number	b2. Current Grad Number (If dual-listed) or enter N/A.		APPROVED Effective Semester	Effective Year
				(PROVOST OFFICE USE ONLY) - FOR CATALOGS	
				APPROVED Effective Semester	Effective Year



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**1. General Information (Must be completed by all) - RED FIELDS ARE REQUIRED.**

a. Originating Person Name (Print)	b. Contact Person's E-mail	c. Contact Phone	d. Date
e. Originating Person's Signature:			
f. Department/Program	g. College/School (Select from dropdown list)	h. Course Level (Select from dropdown)	
i. Type of Curriculum Change (Select from dropdown list) <b>NOTE: If your course is a New Course or Dual-Listed, you must include a syllabus. (ualr.edu/policy/home/facstaff/course-syllabus)</b>			
j. List Multiple Changes or Other Changes (if applicable)			
k. Degree Audit Adjustment Necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe below:			

**2. Current Description (Please include prerequisites.)**

a. Current Subject Alpha Code (e.g., RHET)	b1. Current UG Number	b2. Current Grad Number (if dual-listed) or enter N/A.	c. Current Title (30 or fewer characters/spaces)
d. Current Course Description available at description at <a href="https://catalog.ualr.edu">https://catalog.ualr.edu</a> . Please include prerequisites and graduate course Alpha Code and Number for Dual-Listed courses when applicable.			

**3. New OR Updated Course Information**

a. Requested Effective Semester	Year	b. Type of Course	
c. New Subject Alpha Code (e.g., RHET)	d1. New UG Number	d2. New Grad Number (if dual-listed) or enter N/A	e. New Title (30 or fewer characters/spaces)
f. New or Updated Course Description (Catalog entry) Please include prerequisites and graduate course Alpha Code and Number for Dual-Listed courses when applicable.			

g. Credit Hours	h. Anticipated Enrollment per Semester:	i. Repeatable for additional credit?j2. If yes, how many additional times (Provide a number OR choose "Unlimited")	Yes	No	Select Unlimited
j. Retake/Replace (UG Only)?		Yes	No	OR	

**Note: Include a Syllabus for New and/or Dual-Listed Courses.**



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**4. Course Restrictions (Select type and enforcement from dropdown lists. Use additional sheet if necessary)**

a.1	b.1. Details	c.1 Enforced by
a.2	b.2. Details	c.2 Enforced by
a.3 Type of Restriction	b.3. Details	c.3 Enforced by
d. Special Grading: <input type="checkbox"/> Yes <input type="checkbox"/> No Explain		
e. Is the content of this course duplicated in other degree programs outside your department? <input type="checkbox"/> Yes <input type="checkbox"/> No		f. Does this change affect any other program? <input type="checkbox"/> Yes <input type="checkbox"/> No
g. If you answer yes to either “e” or “f,” include a signature below from the other department chair.		
h. Other department chair signature:		

**5. Justification (You must include—but you are not limited to—statements about the need for course changes or new course.)**

**6. Resources (You must include—but you are not limited to—the availability of faculty/physical resources.)**

**7. Course Grading Scale (Select from dropdown list)**

Normal (A-F)

**8. CORE Courses Only**

Select an Option



### Modifications Page

*This page is designed to document any changes or modifications to this curriculum change form indicated by the any Curriculum Committees after item is submitted for review.*

#### 1. College Curriculum Committee Modifications

#### 2. Graduate Curriculum Committee Modifications

#### 3. Dean's Office Notes

#### 4. Undergraduate Council Modifications

#### 5. Graduate Council Modifications