



COURSE PROPOSAL FORM

Office of Registration and Records

Department:

Instructor:

Official Course Title (appears in print bulletin):

Abbreviated Course Title (limit to 30 characters)

Proposed Course Number

1. How many credits are offered for this class? (Please review attached Credit/Contact Hour policy form.)

- 1.5 credits, 3 credits, 6 credits, 9 credits, Other

2. What type of credit will be issued? (Please Check One)

- Studio, Art History, Liberal Arts \*

\* 2.1 If proposing Liberal Arts please indicate the area

- English, Humanity, Natural Science, Social Science, Foreign Language

3. What type of class is this?

- Studio, Seminar or Lecture, Studio Symposia, Technical Lab, Other

4. Is this class part of the Academic Spine\*? (Please select only one.)

- No, Yes SOPHSEM 2900, Yes PROFPRAC 3900, Yes CAPSTONE 4900

\* All academic spine courses must be approved by the Department and the Undergraduate Division. All new spine faculty require a 90-minute faculty orientation and training session.

5. What level is this class?

- 1000, 2000, 3000, 4000, 5000 Grad Only, 6000 Grad Only

6. Which year and semester will this class be offered? (For summer classes please circle which session.)

- Year, Fall, Winter, Spring, Summer (3W1, 3W2, 3W3, 3W4, 6W1, 6W2)

7. Is this a brand new course or an adaptation of an existing course? Please explain.

8. Will this course require any off-campus travel?

- Overnight trip\*\*, Daytrip in Chicago, Daytrip outside of Chicago

\*\*8.1) If this is an "Overnight trip" please describe all off-campus activities included in this class:

(Please list destinations, dates, and attach a sample itinerary.)

9. Do you want this course considered for off-campus credit? Yes No

(If yes, please explain rationale in 2-3 sentences.)

**10.a) Are there prerequisites?**  
(If yes, list by department and course number.)

**b) Are there co-requisites?**  
(If yes, list by department and course number.)

**11. 75-Word Course Description** (List course goals, content covered, and refer to the type of required projects.)

**12. If appropriate, does this course address issues of cultural competency for a diverse student body?**

**13. Does the course align with one or more SAIC interdisciplinary areas of study? Check a maximum of 3 areas.**

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Art/Design Nexus           | <input type="checkbox"/> Comics and the Graphic Novel      | <input type="checkbox"/> Narrative                | <input type="checkbox"/> Study Abroad/Off-Campus |
| <input type="checkbox"/> Art and Science            | <input type="checkbox"/> Digital Fabrication               | <input type="checkbox"/> Politics and Activisms   | <input type="checkbox"/> Sustainability          |
| <input type="checkbox"/> Body, Gender, Sexuality    | <input type="checkbox"/> DIY                               | <input type="checkbox"/> Professional Practice    |  |
| <input type="checkbox"/> Books and Publishing       | <input type="checkbox"/> Exhibition and Curatorial Studies | <input type="checkbox"/> Public Space             |  |
| <input type="checkbox"/> Class, Race, and Ethnicity | <input type="checkbox"/> Global Studies                    | <input type="checkbox"/> Site and Landscape       |  |
| <input type="checkbox"/> Collaboration              | <input type="checkbox"/> Interaction and Participation     | <input type="checkbox"/> Social Media and the Web |  |

**14. What departmental learning goals does this course address and how?**

**15. Any other concerns or requests?** (e.g., enrollment concerns, team-teaching, or danger of duplicating existing curriculum)

**Department Chair Signature**  
(can be attached as an approval email)

X \_\_\_\_\_  
Sign Name Date

\_\_\_\_\_  
Print Name