



COMMITTEE ON COURSES OF INSTRUCTION  
ACADEMIC SENATE-BERKELEY  
**COURSE APPROVAL FORM**  
TO REQUEST COURSE  
MODIFICATION, APPROVAL OR WITHDRAWAL  
E0610 (R2/97)

Department	
Course Number	
Date Submitted	Effective Term (i.e. Fall 1999, etc.)

Course Title

Abbreviated Transcript Title (19 Characters)	Grading (Letter, P/NP, S/U, IP)	Units	Offered (F, Sp, Su)
--	---------------------------------	-------	---------------------

Courses that will restrict credit	Instructor(s)
-----------------------------------	---------------

Prerequisites

Duration of Course + Format: (check as many as apply—indicate F/Sp and/or Summer offerings)	Estimated Total Number of Required Hours of Student Work per Week:  15 week term    8 week term    Other  10 week term    6 week term
<input type="checkbox"/> 15 weeks Term: <input type="checkbox"/> Fall/Spring <input type="checkbox"/> Summer	
<input type="checkbox"/> 10 weeks Term: <input type="checkbox"/> Fall/Spring <input type="checkbox"/> Summer	
<input type="checkbox"/> 8 weeks Term: <input type="checkbox"/> Fall/Spring <input type="checkbox"/> Summer	
<input type="checkbox"/> 6 weeks Term: <input type="checkbox"/> Fall/Spring <input type="checkbox"/> Summer	
Other: <input type="checkbox"/> _____ week(s)    Term: <input type="checkbox"/> Fall/Spring <input type="checkbox"/> Summer	

Course Description: (500-space limit)

CHECK AS MANY AS APPLY: NEW COURSE MUST INCLUDE SYLLABUS, READING LIST, ETC., TO BE PROVIDED ON SEPARATE SHEET

<input type="checkbox"/> New course in regular program of department	<input type="checkbox"/> Change course title	<input type="checkbox"/> Change prerequisite						
<input type="checkbox"/> Withdrawal of course (last offered: _____)	<input type="checkbox"/> Change course description	<input type="checkbox"/> Change grading option						
<input type="checkbox"/> Special purpose course to be offered only once	<input type="checkbox"/> Change unit value	<input type="checkbox"/> Other (Explain in "remarks")						
<input type="checkbox"/> Summer session course	<input type="checkbox"/> Change format	<table border="1"> <tr> <td colspan="2">Course repeatable for credit?</td> </tr> <tr> <td>Yes*</td> <td>No</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Course repeatable for credit?		Yes*	No	<input type="checkbox"/>	<input type="checkbox"/>
Course repeatable for credit?								
Yes*	No							
<input type="checkbox"/>	<input type="checkbox"/>							
<input type="checkbox"/> American Cultures course	<input type="checkbox"/> Change course number (from _____ to _____; last term offered: _____)							
<input type="checkbox"/> Restoration of course (previous course # _____; last term offered: _____)								

REMARKS:

Chair-Adminstrating Department	Committee on Courses of Instruction
Dean of College, Division or School	Graduate Division