

## General Guidelines

### CURRICULUM COMMITTEE ZERO CREDIT COURSE PROPOSAL

1. Please note: This form is for proposing ZERO CREDIT COURSES THAT HAVE EXISTING FOR-CREDIT OPTIONS. Courses without existing for-credit options must be submitted as a full course proposal.
2. Please provide entries for each item. If the item is not applicable, simply indicate that this item does not apply to the proposed course.
3. Please note the catalog text for zero credit courses: Some courses may be offered for zero credits. Zero-credit courses are specifically listed as zero-credit courses. Courses not listed as zero-credit courses will not be offered for zero credits. Courses taken for zero credits will not be retroactively changed to credit-bearing courses at any time. All academic policies applicable to credit-bearing courses are also applicable to zero-credit courses. All zero-credit courses will be graded pass-fail. If a zero-credit course is required for a major or minor, it is an exception to the rule that courses in a major or minor may not be taken pass-fail.
4. All course proposals must be submitted by October 1 to ensure that they are considered in time for the subsequent academic year.
5. Please submit the completed form electronically (preferably as a PDF attachment) to curriculum@hope.edu.
6. Academic Affairs Board action (December, 1986) requires that the information contained within sections A-F be distributed to the full-time faculty of the college three weeks in advance of submission to the Curriculum Committee. In the case of 295/495 courses, though no Curriculum Committee approval is required, the information must still be circulated.

**Course Proposal Department:****Submission Date:**

\_\_\_\_\_

\_\_\_\_\_

**A. Existing Course Title:** \_\_\_\_\_

1. Existing Course Number: \_\_\_\_\_

2. Is this course required for a major?

No

Yes. If yes, please explain:

**B. Rationale for Zero-Credit Offering:** Please provide the rationale for offering this course as a zero-credit option rather than limiting students to the existing credit bearing course currently offered.

**C. Anticipated Student Workload:** Please briefly describe the anticipated student work load for this zero-credit course. It is anticipated that a student complete a minimum of 30 hours of work (combined in and out of class), but not require more than 45 hours of work, in a 15 week semester. If a different standard is to be applied, please clearly state the requirements and justification for those requirements.

**D. Course Approval:**

1. Author of the Proposal

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2. Department Chairperson

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

3. Divisional Dean

*Note: The signature of the Divisional Dean certifies that all aspects of this curricular change have been discussed and approved. Faculty/staf contact hours (Section E) and Financial Impact (Section G) must be specifically approved by initialing.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

4. Instructor(s) of the Course

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

5. Registrar

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**E. Suggested Faculty Contact Hours for the Course:**

\_\_\_\_\_

*Divisional Dean Approval (initial):* \_\_\_\_\_**F. Semester/Session/Years When The Course Will be Offered (Fall, Spring, Summer, Alternate Years, etc.)****G. Financial Impact of the Course:** Provide financial information pertaining to such items as staff additions, staff time, facilities, equipment, and material.

*Note: The financial implications of this curricular change should be discussed with your Divisional Dean well in advance of submitting this proposal. The Divisional Dean's signature on this proposal (Section B) and initials below certify that all financial implications of this proposal have been discussed and approved.*

*Divisional Dean Approval (initial):* \_\_\_\_\_**H. Maximum and Minimum Enrollment** (for credit and no-credit combined)

Maximum: \_\_\_\_\_

Minimum: \_\_\_\_\_