

**SUBMIT ORIGINAL AND 4 COPIES TO YOUR DIVISION CHAIR**

APPLICATION FOR **GRADUATE** COURSE MODIFICATION  
UNIVERSITY OF HAWAII AT HILO

1. College\_\_\_\_\_Division\_\_\_\_\_Department\_\_\_\_\_

Course Alpha\_\_\_\_\_ Course Number\_\_\_\_\_ Course Title\_\_\_\_\_

2. Description of existing course as it is in the current catalog: (Underscore all parts to be changed or deleted.)

3. Description of modified course in university catalog style (should not exceed five lines and be **publication-ready**). Underscore all new or changed parts. Course title should not exceed 30 letters, including spaces.

Hrs/wk: Lectures\_\_\_\_\_ Lab\_\_\_\_\_ Discussions\_\_\_\_\_ Field Trips/Sem\_\_\_\_\_

4. Justify the number of credits and the level of the course. Generally, 600, 700 and 800 level courses have explicit pre-requisites and, moreover, 700 level courses cover more advanced materials than 600 level courses. If there are no pre-requisites, justification must be provided.

5. Reasons for the requested modification. (Use separate sheet[s] as necessary)

6. Outline how the modification will impact **any/all** GRADUATE programs or certificate programs so the modification may be accommodated in the Degree Audit System.

List the programs which are either potentially or directly affected by this proposed codification. The Graduate Council requires that written releases from the other affected programs be submitted.

7. What are the revised expected learning outcomes?

8. How will the students be evaluated?

9. How will the course be assessed as achieving the expected learning outcomes?

Course modification: Course \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Name of Submitter (please type) Signature Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Name of Program Director Signature Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Program: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Name of Department Chair(s) Signature Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Department Vote: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Signature (s) of Division Chair(s) and Date(s)

**NOTE: THE SUBMITTER FORWARDS THIS APPLICATION TO THE FACULTY SENATE CHAIR AFTER DIVISION CHAIR(S) SIGNATURE(S)**

**Curriculum Review Committee:** Approved  Not Approved

\_\_\_\_\_  
Signature of CRC Chair Date Vote: \_\_\_\_/\_\_\_\_/\_\_\_\_

CRC Comments:

**Senate:** Approved  Not Approved

\_\_\_\_\_  
Signature of Senate Chair Date Vote: \_\_\_\_/\_\_\_\_/\_\_\_\_

Senate Comments:

**Approval of the Council of Deans** Date \_\_\_\_\_

**Dean:** Approved  Not Approved  Articulation: N/A

\_\_\_\_\_  
Signature of Dean Date Completed:

Dean's Comments:

Signature page returned to: Senate Chair on \_\_\_\_\_ (date)

Submitter on \_\_\_\_\_ (date)

Copy of Application sent to Course Inventory/DSA – Office of the Registrar on \_\_\_\_\_ (date)

Placed in catalog on \_\_\_\_\_ (date)