

**Courses of Study**

**Minor Modifications Proposal Form for**

**Courses or Programs**

(4/15/2022)

The Courses of Study (COS) Committee meets monthly and reviews proposals on a rolling basis. COS-approved proposal forms and supporting materials are distributed to the full GSE faculty one week prior to the GSE faculty meeting for consideration and full faculty vote. Please refer to the COS Faculty Guidance Sheet for more information on COS form preparation. Completed COS forms should be emailed to the COS Committee chairperson.

**INSTRUCTIONS**

This form can be used to propose minor changes to a course or program. A separate form is required for each course or program, even if they are linked. Complete all applicable fields where changes are being proposed. Include a clear rationale for the proposed change. Mark NA (not applicable) for those fields where no changes are proposed. Type directly into the expandable boxes. Do not convert this document to a pdf file. Sections:

1. Type of Change
2. Diversity, Equity, Inclusion & Social Justice
3. Submission Checklist
4. Approved Actions
5. **TYPE OF CHANGE**

**COURSE  PROGRAM**

**Current course name and number or program name** (as applicable)

|  |
| --- |
|  |

**Title  NA**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED: (80 character maximum including spaces)** | **RATIONALE:** |

**Abbreviated Title  NA**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** (20 character maximum including spaces) | **RATIONALE:** |

**Credits  NA**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** | **RATIONALE:** |

**Create Undergraduate Version of Course  NA**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** | **RATIONALE:** |

**Course Delivery  NA**

Options: Face-to-Face, Hybrid, Online Synchronous, Online/Asynchronous, Online Mixed Synchronous and Asynchronous, Converged Learning (students choose to attend in-person or online)

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** | **RATIONALE:** |

**Course/Program Description  NA**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** | **RATIONALE:** |

**Program Admission Requirements/Procedures  NA**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** | **RATIONALE:** |

**Pre-requisite/other Requirement  NA**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** | **RATIONALE:** |

**Other-1 (specify):**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** | **RATIONALE:** |

**Other-2 (specify):**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** | **RATIONALE:** |

**Other-3 (specify):**

|  |  |  |
| --- | --- | --- |
| **CURRENT:** | **PROPOSED:** | **RATIONALE:** |

1. **DIVERSITY, EQUITY, INCLUSION & SOCIAL JUSTICE**

What actions have been taken to retain or enhance the GSE’s commitment to diversity, equity, inclusion, and social justice, in the proposed course or program modifications?

|  |
| --- |
|  |

# SUBMISSION CHECKLIST

# Submit a revised control sheet for modifications to courses or programs that affect the program control sheet. Consult the Office of Student & Academic Services (OSAS) for guidance.

# For modifications to courses or programs that are subject to state review, consult the Associate Dean and Director of Teacher Education for guidance

1. **APPROVED ACTIONS**

Typed signatures are sufficient for this COS form. Do not convert this form to a pdf file.

|  |  |  |
| --- | --- | --- |
| **DEPARTMENT OR SCHOOLWIDE**  **PROGRAM** | | |
| Change proposed by: | |  |
| Date approved: | |  |
| Signature of Chair or Director: | |  |
|  |  | |
| **COURSES OF STUDY** | |  |
| Date considered: | |  |
| Action: | |  |
| Signature of Chair: | |  |
| Date dept or program notified: | |  |
|  | | |
| **FACULTY ACTION** | |  |
| Date circulated: | |  |
| Date considered: | |  |
| Action: | |  |

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