

9 CONTACT HOURS PER WEEK:

11. COURSE REPEATABLE
YES NO

YES: NO: X

12. COURSE REPEATABLE

YES

NO

How many times

TIMES

If the course credit number of credits

CREDITS

If the course credit number of credits

CREDITS

maximum number of credit hours that may be earned for this course?

13. **GRADING SYSTEM:** Specify only one. Note: Changing the grading system for a course later on constitutes a Major Course Change - Format 2 form.

LETTER: PASS/FAIL:

RESTRICTIONS ON ENROLLMENT (if any)

14. **PREREQUISITES**

15. **SPECIAL RESTRICTIONS,
CONDITIONS**

16. **PROPOSED COURSE FEES**

Has a memo been submitted through your dean to the Provost for fee approval?

17. **PREVIOUS HISTORY**

Yes/No

18. **ESTIMATED IMPACT**

19. **LIBRARY COLLECTIONS**

H

J e e
o e e t a
o o c

20. IMPACTS ON PROGRAMS/DEPTS

y

x

21. POSITIVE AND NEGATIVE IMPACTS

positive and negative



01

02

03

04

05

06

07

APPROVALS: Add additional signature lines as needed.

Signature Chair [Redacted] Date 9/23/14

Program/Department of

Signature Chair College/School Curriculum Council for

Date

Signature of Provost (if above level of approved programs)

Date

Signature Chair Faculty Senate Review Committee

Co

C

Signature Chair Program/Department of

Date

Signature Chair College/School Curriculum Council for

SYLLABUS CHECKLIST FOR ALL UAF COURSES

• sion
• iting

9. Course policies:

cl ss

10. Evaluation:

to cl e their
 o c e olute
 o C elow as
1. o e t y to
1

http://.uaf.edu/file_uaf_ov/Info-to-Publicize-C_Gradin_-Polic_-DATED-Ma_-2013..df

11. Support Services:

12. Disabilities Services:

updated.

[htt://.uaf.edu/disabili](http://.uaf.edu/disabili)

It

Tue, May 6, 2014 at 9:51 AM

ber@alaska.edu>

. e
[Q ot d x hid

Tue, May 6, 2014 at 9:52 AM

k' t DEVM 109J.



