Course Revision Form

I. DEPARTMENT

II. TYPE OF CHANGE *(Check all that apply)*

☐	Close Out Course	☐	Credit Hours	☐	Lab Hours	☐	Add/Delete Prerequisite
☐	Title	☐	Description	☐	Repeatability	☐	Add/Delete Corequisite
☐	Subject Area	☐	Cross-Listing	☐	Grading	☐	Instructional Method/Schedule Type
☐	Course Number	☐	Course Fee	☐	Add 6000, 7000 or 8000 level course		

III. CATALOG DESCRIPTION

Subject Area		Course Number		Credit Hours	
Schedule Type					
Previous Number *(if changing)*		Previous Hours *(if changing)*			
Instructional Method				Grading:	○ A-F ○ S/U,I ○ S/U,IP ○ A-F, IP
Course Title					
Previous Title *(if changing)*					
New Course Description or reason for change.					

IV. OVERLAP

This course has been discussed with other departments to ensure against overlap.

No ○ Yes ○ Person contacted in the other department

V. Please submit your name and e-mail address as a contact source for this form.

Name E-Mail Reset

For information on completing this form, please contact: aiss@memphis.edu for undergraduate, or graduateschool@memphis.edu for graduate revisions.