

• New Course Dean Pre-Approval Questions

- Consultation with the Dean or Director early in the curriculum development process contributes to the timely processing of curriculum proposals. Please submit this completed form at least one month prior to the planned curriculum proposal submittal date to ensure adequate time for any needed discussions, or possible revisions and resubmissions.

- Name *

First Name Last Name

- Email *

example@example.com

- Dean/Director *

- 1. What is the title of the course?

- 2. What is the tentative course description? (5 sentences or less)

- 3. How many units are being proposed?

- What is the unit breakdown for lecture, lab, and activity?

- Lecture units

- Lab units

- Activity units

- 4. Will this course fit into any existing degrees or certificates?

Yes No

- Which ones?



- 5. What is the rationale for the course? (If intended for transfer or articulation, then have you consulted the Cuesta College Articulation Officer?)



- 6. How does this course fit into the College Mission?



- [College Mission](#)

- 7. Does the course require additional resources?

Yes No

- If yes, please describe required resources and how they will be funded.

- 8. Does the department currently have faculty that meet the Minimum Qualifications for the proposed Minimum Qualifications Discipline Designation for the course?
Please consult Division Chair if unsure.

Yes No

- 9. What will the course cap be, and how will this affect the department's efficiency?
Please consult AP 4023 and Division Chair if needed.

[AP 4023](#) Establishment and Modification of Course Caps

- Course cap:

- Tentative course cap category

- How will this affect the department's efficiency?

- 10. Does this course duplicate or overlap an already existing course in any department? Please consult with other departments if necessary.

Yes No

- If yes, please explain:

- Initial Date of Form Submission:

  Date Date Picker Icon

- Revision Date (if applicable):

  Date Date Picker Icon

- The following will receive copies of the form when submitted and edited:
- Dean/Director (and assistant)
- Curriculum Committee Chair
- Curriculum Resource Specialist
- Submitting faculty member

PLEASE USE SUBMIT BUTTON AT BOTTOM OF FORM.

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- **THIS SECTION TO BE COMPLETED BY DEAN/DIRECTOR**
- Pre-Approved

Yes No

- The following concerns need to be discussed:

- Dean/Director

Clear

- Date



Date Date Picker Icon

- **Faculty:** Use this submit button for initial submissions and any revised submissions.
- **Deans/Directors:** Use this submit button for pre-approval and to accept any revised submissions.

- **Submit**

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