**X Course Creation Form:** **Enter X-Course Prefix/Number here**

(Undergraduate Courses Only)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **I. Routing Information**  **Completed forms should be e-mailed to** [**Curriculum@unlv.edu**](mailto:Curriculum@unlv.edu) | | | | | | | | | | | | | |
| To whom should we address comments/questions? | | | | | | | | | | | | |
| Contact’s e-mail address: |  | | | | | | | | | | | |
| Your Department Prefix: |  | | | | | | Your college: | | |  | | |
| Justification for X-Course: | | | | | | | | | | | | |
| **II. Course Information** | | | | | | | | | | | | | |
| **Re-enter X-Course Prefix/Number (e.g., AAS 101X):** | | | | | | | |  | | | | | |
| Check if this is an Educational Outreach Course: | | | | | | | | | | | | | |
| Has this course been used before? | | | | Yes  No  If yes, course #       Semester offered: | | | | | | | | | |
| Course Title: | | | | |  | | | | | | | | |
| Abbreviated Title (25 Character Limit): | | | | |  | | | | | | | | |
| Is this a Special Topic course? Yes  No  If yes, please list topic: | | | | | | | | | | | | | |
| Prerequisites? Yes  No  If yes, Describe: | | | | | | | | | | | | | |
| Grading System: | | | | | Fixed Number of Credits: | | | | | |  | | |
|  | | | | | OR Variable Number: | | | | | |  | | |
| Is Course Repeatable? Yes  No  If Yes, for maximum of       credits. | | | | | | | | | | | | | |
| Course Description (50 words or less) : | | | | | | | | | | | | | |
| Will this course be used to fulfill a program or elective requirement? Yes  No | | | | | | | | | | | | | |
| If yes, please explain: | | | | | | | | | | | | | |
| **III. Scheduling Information** | | | | | | | | | | | | | |
| When do you want course offered (e.g., Spring 2007)? | | | | | | | | | | | | | |
| Will this course need a general purpose room? Yes  No  What is the Cap? | | | | | | | | | | | | | |
| **Day(s) and Time(s) of Course** | | | | | | | | | | | | | |
| If your course is 3 credits:  OR | | | | | | | | | | | | | |
| If your course is 2 credits:  OR | | | | | | | | | | | | | |
| If your course is 0 or 1 credit: | | | | | | | | | | | | | |
| OR enter non-standard day(s) / time(s) | | | | | | | | | | | | | |
| **IV.Comments** | | | | | | | | | | | | | |
| Is there anything else you would like to notify us of? | | | | | | | | | | | | | |
| **V. Endorsement/Approvals**  Complete form and obtain electronic signatures **before** submitting to the Registrar’s Office. | | | | | | | | | | | | | |
| **Instructor, Department Chair, Dean’s Approval** | | | | | | | | | | | | | |
|  | | Yes | No | | | Name | | | Date | | | Comments | |
| Instructor | |  |  | | |  | | |  | | |  | |
| Dept. Chair | |  |  | | |  | | |  | | |  | |
| Dean | |  |  | | |  | | |  | | |  | |
| **Faculty Senate Curriculum Approval** | | | | | | | | | | | | | |
| Curriculum Committee Chair | | Yes | No | | | Agenda # | | | Date | | | Comments | |
|  | |  |  | | |  | | |  | | |  | |
| Note: The course will default to ‘Staff’ if an instructor has not been indicated. | | | | | | | | | | | | | |
| For use of the Registrar’s Office  Acalog: Initials       Date       Comments:  MyUNLV: Initials       Date       Comments: | | | | | | | | | | | | | |

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