

Instructions for filling out the MASCCGC Correction Form

1. Use this form for submission to the Academic Standards & Curriculum Committee and to the Graduate Council for **items that were already approved at a prior ASCC Meeting but correction to the information is needed.**
2. Uploaded submissions to ASCC SharePoint are done by the Dean's Office of each College after signatures are obtained for UG. The Graduate Office will upload grad-level Mod Forms to SharePoint and email the colleges that it was done.
3. Include the date of the ASCC meeting where the original Mod Form was approved.
4. In the Current Section, submit the info that was on the original Mod Form that needs changing. Submit only that portion. For example, if only the Course Title needs correcting, only include the currently approved Course Title for the Current Section.
5. In the Proposed Section, submit the info that is to be corrected. Submit only that portion. For example, if only the Course Title needs correcting, only include the corrected Course Title for the Proposed Section.
6. In the Rationale/Instructions section, info must visibly fit inside the box or on a separate sheet with "See attached" printed in the box on the form. Submit why the correction is needed.
7. Please Email the original form to Ms. Strother for reviewing. Once she has signed-off, the remaining signatures should be obtained in this order – left to right and then down. The Registrar's Ofc signature is required only if a course number change or a new course subject is being created.



Program: _____ Degree, Name (abbrv) _____ Department _____ Coll/Schl _____

CURRENT

Course: _____
Subject Number Credit Hrs Contact Hrs CIP Code Pass Grd MinGPA Title (limited to 30 characters/spaces total)

DESCRIPTION

Course: _____ Pre-requisites _____ Co-requisites _____
☐ yes Cross-listed? ☐ yes Dual-level?

MOTION:

PROPOSED

Course: _____
Subject Number Credit Hrs Contact Hrs CIP Code Pass Grd MinGPA Title (limited to 30 characters/spaces total)

DESCRIPTION

Course: _____ Pre-requisites _____ Co-requisites _____
☐ yes Cross-listed? ☐ yes Dual-level?

☐ yes
Frequency Offered Repeat-able? Quantity Delivery % Breakdown

Banner Begin Bull/Cat Yrs Add to / Rmv from

Rationale/Instructions: (Special funding → explain source. Cross-listed or dual-level course → explain why needed and state equivalent course(s).)

C. Strother

Registrar's Office *** Required for new course subj or number chg *** Date

Department Committee Date

Department Chairperson Date

College Dean Date

Dean, Graduate Studies *** Required for graduate programs *** Date

Approved: ☐ yes ☐ no
Graduate Council Date

Approved: ☐ yes ☐ no
Academic Standards & Curriculum Committee Date

Provost & Vice President, Academic Affairs Date