UNIVERSITY OF HAWAI‘I AT MĀNOA
UHM-2 FORM (MODIFY/DELETE A COURSE)

See Guidelines for instructions and deadlines. For undergraduate courses, submit an original and 4 copies; graduate courses, submit an original and 6 copies. If cross-listed, include extra copies for cross-listed department(s) & college(s). List one course per form. Attach additional sheets as needed.

1. Transaction Type
   - Modify
   - Delete
   - See p. 22

2. Course Subject and Number
   - See p. 23

3. Existing Full Course Title
   - See p. 23; SCASYLB

4. Effective Term of Change
   - See p. 23; do not abbreviate

5. Honors Counterpart Exists?
   - No
   - Yes – Honors Program must sign Box 11. Specify course:

   - See p. 23

6. Existing Cross-Listed Course(s)
   - Signature of cross-listed department(s) required in Box 11 and Dean(s) in “Approved By” section. To remove cross-listed status also check Box 8n.

   - See p. 23-24, write “none” if not cross-listed with any course

7. Existing现任
   - Diversity Foundations
   - Second Language Designation
   - If requesting change to designation also fill out Box 8f
   - See p. 24, write “none” if N/A

8. Type of Change
   - Check all that apply. For each change, fill in CHANGE DETAILS below. Read instructions carefully before completing this section. Use additional sheets if needed.

   - a. Course Subject &/or Number
   - b. Frequency
   - c. Offering Status
   - d. Full Course Title/Banner
     - 24-29 max. incl. spaces/punctuation
   - e. Grade Option
   - g. Contact Hours/Number of Credits/Repeat Limit/Credit Limit
   - h. Schedule Type
   - i. Co-requisite Course(s)
   - j. Major Restrictions
   - k. Class Standing Restrictions
   - l. (i) Prerequisite Course(s)
   - (ii) Prerequisite Grade Requirement
   - (iii) Blanket Requirements
   - m. Catalog Description
   - n. Cross-listed/Honors Course(s) – Signatures required in Box 11 (6 “Approved By” sections for cross-listings). Submit syllabi for honors courses.

9. Description of Change(s) & Justification
   - Describe the change and why it is being requested, including its relationship to your overall curriculum. Attach additional sheets if needed.

   - See p. 29. Also address if additional resources are required and specify affected units.

10. Consultation
    - If other UHM departments and/or UH-system campuses will be affected, have they been consulted? (e.g., course is a prerequisite, required for another at another UH campus, etc.)
    - Yes – Indicate offices/campuses:
    - Not applicable major, offered

11. Cross-listed Department(s)/Honors Program
    - Dept/Unit
    - Chair/Director
    - Signature
    - Date
    - Dept/Unit
    - Chair/Director
    - Signature
    - Date

12. Requested By
    - I certify that the student learning objectives for this modified course are consistent with the learning objectives of each program under which the course is listed.

    - Dept/Unit
    - Chair/Director
    - Signature
    - Date

Approved By

1st College/School
- Dean
- Signature
- Date

2nd College/School
- Dean
- Signature
- Date

General Education (Undergraduate courses numbered 100-499)

- Director
- Signature
- Date

Graduate Division (600 level and above)

- Dean
- Signature
- Date

Mānoa Chancellor’s Office

- Vice Chancellor for Academic Affairs
- Signature
- Date

Guidelines (OVCAA)

UHM-2 (OVCAA)

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