

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 ? <input type="checkbox"/> Modify <input type="checkbox"/> Delete <i>see p. 22</i>	2. Course Subject and Number ? <i>see p.23</i>	3. Existing Full Course Title ? <i>see p. 23; SCASYLB</i>	4. Effective Term of Change ? <i>see p. 23; do not abbreviate</i>												
5. Honors Counterpart Exists? ? <i>see p. 23</i> <input type="checkbox"/> No (To add honors counterpart course also check Box 8n) <input type="checkbox"/> Yes – Honors Program must sign box 11. Specify course:		7. Existing Diversification, Foundations, Hawaiian/ Second Language Designation ? <i>If requesting change to designation also fill out Box 8f</i> <i>see p. 24 write "none" if N/A</i> GEC Use: <input type="checkbox"/> Continue <input type="checkbox"/> Remove GEC Initials _____													
6. Existing Cross-Listed Course(s) <i>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.</i> <i>see p. 23-24; write "none" if not cross-listed with any course; SCADETL</i> ?															
8. Type of Change <i>Check all that apply. For each change, fill in CHANGE DETAILS below. Read instructions carefully before completing this section. Use additional sheets if needed.</i> <input type="checkbox"/> a. Course Subject &/or Number <input type="checkbox"/> e. Grade Option <input type="checkbox"/> g. Contact Hours/Number of Credits/Repeat Limit/Credit Limit <input type="checkbox"/> k. Class Standing Restrictions <input type="checkbox"/> m. Catalog Description <input type="checkbox"/> b. Frequency <input type="checkbox"/> f. Diversification, Foundations, Hawaiian/Second Language Designation <input type="checkbox"/> h. Schedule Type <input type="checkbox"/> i. (i) Prerequisite Course(s) (ii) Prerequisite Grade Requirement (iii) Blanket Requirements <input type="checkbox"/> n. Cross-listed/Honors Course(s) – Signatures required in Box 11 (& "Approved By" section for cross-listings). Submit syllabus for honors courses. <input type="checkbox"/> c. Offering Status <input type="checkbox"/> i. Co-requisite Course(s) <input type="checkbox"/> j. Major Restrictions <input type="checkbox"/> d. Full Course Title/Banner <i>see p. Title (Banner title 30 char. 24-29 max incl. spaces/punctuation)</i>															
CHANGE DETAILS															
Change Type <i>(Specify letter noted above)</i>		Existing Data <i>(Check Banner to confirm)</i>													
Proposed Data <i>(Enter data as it should appear AFTER change. Use Box 9 to describe change.)</i>															
Address all items for g. and i. ?		Check Banner for existing information													
9. Description of Change(s) & Justification <i>Describe the change and why it is being requested, including its relationship to your overall curriculum. Attach additional sheets if needed. Attach a course syllabus for the modified course specifying student learning objectives for the course. Syllabi are not required for "-99" courses.</i> <i>see p. 29. Also address if additional resources are required and specify affected units.</i>															
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.) <input type="checkbox"/> Yes -- Indicate offices/campuses: <input type="checkbox"/> Not applicable major, offered															
11. Cross-listed Department(s)/Honors Program <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Dept/Unit ?</td> <td style="width: 25%;">Chair/Director</td> <td style="width: 25%;">Signature</td> <td style="width: 25%;">Date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>Dept/Unit</td> <td>Chair/Director</td> <td>Signature</td> <td>Date</td> </tr> </table>				Dept/Unit ?	Chair/Director	Signature	Date					Dept/Unit	Chair/Director	Signature	Date
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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															
1 st College/School		Dean													
Signature		Date													
2 nd College/School		Dean													
Signature		Date													
General Education <i>(Undergraduate courses numbered 100-499)</i>															
Director		Signature													
Signature		Date													
Graduate Division <i>(600 level and above)</i>															
Dean		Signature													
Signature		Date													
Mānoa Chancellor's Office															
Vice Chancellor for Academic Affairs		Signature													
Signature		Date													