

UNIVERSITY OF HAWAII AT MĀNOA

UHM-1 FORM (ADD A COURSE)

See [Guidelines](#) for instructions and deadlines. Submit forms (one course per form) to uhmcrse@hawaii.edu.

1. Course Subject and Number	2. Effective Term & Year <input type="checkbox"/> FA _____ <input type="checkbox"/> SP _____ <input type="checkbox"/> SU _____	3. Frequency (check all that apply) <input type="checkbox"/> Fall Semester <input type="checkbox"/> Summer Semester <input type="checkbox"/> Spring Semester <input type="checkbox"/> Alternate Years	4. Offering Status (check one) <input type="checkbox"/> Regular <input type="checkbox"/> Experimental (~97 or ~98 only)
5a. Full Course Title (for alpha courses, attach a separate sheet and specify the title for <u>each</u> alpha)		6. Grade Option (check all that apply) <input type="checkbox"/> Letter Grade <input type="checkbox"/> Satisfactory/Unsatisfactory (500, 700, 800 only) <input type="checkbox"/> CR/NC <input type="checkbox"/> Honors (Medicine only) <input type="checkbox"/> Audit	
5b. Banner Course Title (30-character maximum, including spaces and punctuation; use title case. For alpha courses, attach a separate sheet and specify the title for <u>each</u> alpha)		7a. Gen Ed Foundations, Diversification, or Hawaiian/Second Language Designation (check one) <input type="checkbox"/> Request Gen Ed designation indicated below (complete 7b) <input type="checkbox"/> No designation requested	
7b. If requesting Gen Ed Designation, indicate designation (choose <u>one</u>):		GEO Use: <input type="checkbox"/> None <input type="checkbox"/> Add _____	
DA DH DL DS DB DP DY DB+DY DP+DY FGA FGB FGC FQ FW HSL			
8. Blanket Statement(s) Listed in Catalog (If none, write "none." For all cross-listed courses, include all applicable blanket statements. If requesting a change to the blanket statement, submit memo)			
9. Contact Hours (total meeting hours per semester – if variable, specify range)	10. Number of Credits (if variable, specify range)	11. Repeat Limit (do NOT write "none")	12. Credit Limit (do NOT write "none")
13. Schedule Type (See definitions here) <input type="checkbox"/> Clinical Instruction (CLN) <input type="checkbox"/> Individual Instruction (INV) <input type="checkbox"/> Lecture/Discussion (LED) <input type="checkbox"/> Seminar (SEM) <input type="checkbox"/> Directed Reading & Research (DRR) <input type="checkbox"/> Laboratory (LAB) <input type="checkbox"/> Lecture/Lab (LEL) <input type="checkbox"/> Studio (STU) <input type="checkbox"/> Fieldwork (FLD) <input type="checkbox"/> Lecture (LEC) <input type="checkbox"/> Practicum Instruction (PRA) <input type="checkbox"/> Thesis (THE)			
14. Co-requisite Course(s)	15. Class Standing Restrictions	16a. Major Restrictions (as they should appear in Catalog)	16b. Banner Codes of Acceptable Majors
17a. Prerequisite Course(s) (use "and," "or," <u>and</u> punctuation to indicate relationships between prerequisites)		17b. Minimum Required Grade for Prerequisites	
18. Catalog Description (35-word maximum. Do not include other course information such as frequency, grade option, and prerequisites in the description/word count.)			
19. Justification (attach additional sheets if needed)			20. Syllabus Attached <input type="checkbox"/> Yes <input type="checkbox"/> Not Needed (~99 only)
21. Cross-listed or Honors Course(s)			
Course Subject & Number	Chair/Director	Signature	Date
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22. Requested By I certify that the student learning objectives for the course are consistent with the learning objectives of each program under which the course is listed.			
Department/Unit	Chair/Director	Signature	Date
Approved By			
1 st College or School	Dean or Designee	Signature	Date
2 nd College or School	Dean or Designee	Signature	Date
General Education Office (for courses numbered 100-499)			
Director or Designee		Signature	Date
Graduate Division (for Graduate Division-administered courses)			
Dean or Designee		Signature	Date
Office of the Provost			
Vice Chancellor for Academic Affairs or Designee		Signature	Date