

## CDM New Course Proposal Form

<b>Subject Code</b> (Ex: ENG, PSY, EDU)	
<b>Course #</b> (specify recommended range)	5                  6                  7                  8
<b>Title</b> (30 characters total including spaces)	
<b>Credits</b>	
<b>Grade Mode</b>	<b>Pass/Fail</b>
<b>Schedule Type</b> (Individual Appts., Lecture/Lab, Directed/Independent Study, Lecture, Field Work, Hybrid, Internship/Practicum, Lab, Seminar, Off Campus, Clinical/Rotation, Research, Travel, Internet) <b>*The only schedule types that will be given rooms during scheduling are: Lecture/Lab, Lecture, Hybrid, Lab &amp; Seminar.</b>	
<b>Course Fee</b> (if applicable) i.e. travel course	
<b>Course Description &amp; Role in the Curriculum</b> (i.e. Core, Major, Minor, General Elective)	<b>**ATTACH ELECTRONICALLY** (as word doc.)</b>
<b>Degree Program Attribute</b> (Ex: ADV, EXP)	
<b>Field of Study Restrictions</b> (Majors & Minors)	<b>Include:</b> OR <b>Exclude:</b>
<b>Class Restrictions</b> (Freshmen, Sophomores, Juniors, Seniors)	<b>Include:</b> OR <b>Exclude:</b>
<b>Pre-Requisites</b> (Include Minimum Grade needed)	
<b>Co-Requisites</b> (Include Minimum Grade needed)	
<b>Other</b> (Ex: College, Level, Campus, Dept.)	

**First Semester Offered:**

\_\_\_ Summer \_\_\_ Fall \_\_\_ Spring  
of 20\_\_\_

Please have all boxes completed, an electronic copy of the course description attached and all signatures obtained before sending to the Dean's Office.

Once completely approved, please Scan and Email (with electronic course description to the Registrar's Office:

[UNERegistrar@une.edu](mailto:UNERegistrar@une.edu)

(207) 602-2473

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**Instructor's Signature**

\_\_\_\_\_  
**Dean's Signature**