

School of Continuing Education Course Proposal Form

Eastern Illinois University

- Regular Catalog Course
- Special Course (attach special course proposal form)

Please provide as much information as possible. Incomplete forms cannot be processed.

Term: Fall Spring Summer **Year:** _____

Course Information:

Department Prefix _____ Course Number: _____ Course Format _____

Course Title _____

Location _____ Writing Intensive Yes No

Course Credit _____ Semester Hours Undergraduate Graduate Both

Prerequisites _____

Dates _____ Day(s)/Time _____

Waitlist Option: yes no If yes, maximum number allowed to waitlist: _____
Department responsible for monitoring waitlist: _____

Classroom/Audio Visual:

Classroom, lab, equipment requests: _____

(If requesting use of a computer lab, please include exact dates and times the lab will be needed)

Instructor Information:

Name: _____ E# _____

Email _____ Office Phone _____ Home Phone _____

Work Address _____

Home Address _____

Transportation: University vehicle or Driving own vehicle

Course Funding: (check one)

Workload: Course CU's _____ Travel CU's _____ Total CU's _____

Continuing Education Budget:

- Overload
- Tuition Recovery
- Instructor of Record

Other Budget:

- Department Budget
- Outside Agency/Sponsored _____
- Other (please specify): _____

Signatures: (first 3 signatures are required prior to submission to Continuing Education)

Instructor Date

Department Chair (If instructor is employed in different department, both Department Chairs must sign) Date

College Date

Dean, Graduate School (if applicable) Date

Dean, School of Continuing Education (if applicable) Date

VPAA's Office (if applicable) Date

Special Course Proposal Form

To: School of Continuing Education _____ or Summer School Office _____

Per the Title IV Financial Aid rule, may students repeat this course more than twice? ____ yes ____ no

1. Course Title:

2. Course Description:

3. Course Objectives:

4. Justification of Course Level: (Purpose/Rationale, etc.)

5. Need for Course and Clientele to be Served:

6. Course Similarity: (Similar to any other university course?)

7. Evaluation Methods for Determining Grade:

Please attach a Special Course outline to the back of this form.