REVISED COURSE SYLLABUS CHECKLIST

Course Number and Title:		Date of Submission:	
Syllabus Presenter:		Effective Term:	(semester/cycle/approximate date)

**Please attach the revised syllabus. Consult the Strategic Plan calendar for syllabus submission due dates and subsequent attendance at LICC.

CLASSIFICATION OF COURSE

Academic and/or Career & Technical	Community Education	Section Type
Choose all that apply: ☐ General Education ☐ Program requirement ☐ Elective ☐ Military Programs ☐ Program Alignment	☐ Customized training ☐ Seminar / workshop ☐ Continuing education ☐ Lifelong learning	☐ Public Offering ☐ Business and Industry

SYLLABUS REASON FOR SUBMISSION: Please check all that apply. Anything left incomplete will be returned.

☐ **COURSE TITLE CHANGE:** Please be reminded that course titles can be changed in the FALL SEMESTER ONLY.

Current Course Title _____ Requested Course Title _____

☐ **CREDIT HOUR(S) CHANGE**

Current Credit Hours _____ Requested Credit Hours _____

☐ **COURSE DESCRIPTION CHANGE:** Please type out requested course description.

☐ **PREREQUISITE CHANGE**

Current Prerequisite _____ Requested Prerequisite _____

☐ **OUTCOMES/COMPETENCIES REVISION**

☐ **COURSE HAS NOT BEEN OFFERED IN THE LAST 5 YEARS**

☐ **ALL BARTON INSTRUCTORS (ON ALL CAMPUSES) WHO TEACH THIS COURSE HAVE AGREED ON THESE CHANGES.**