ASU ARIZONA STATE UNIVERSITY

GENERAL STUDIES COURSE PROPOSAL COVER FORM

(ONE COURSE PER FORM)

1.) DATE:	2.) COMMUNITY COLLEGE: **Select college...**

3.) COURSE PROPOSED: Prefix: Number: Title: Credits:

CROSS LISTED WITH: Prefix: Number: ; Prefix: Number: ; Prefix: Number: ;

Prefix: Number: ; Prefix: Number: ; Prefix: Number:

4.) COMMUNITY COLLEGE INITIATOR: PHONE: FAX:

ELIGIBILITY: Courses must have a current Course Equivalency Guide (CEG) evaluation. Courses evaluated as NT (non-transferable are not eligible for the General Studies Program.

MANDATORY REVIEW:

☐ The above specified course is undergoing Mandatory Review for the following Core or Awareness Area (only one area is permitted; if a course meets more than one Core or Awareness Area, please submit a separate Mandatory Review Cover Form for each Area).

POLICY**:** The General Studies Council (GSC-T) Policies and Procedures requires the review of previously approved community college courses every five years, to verify that they continue to meet the requirements of Core or Awareness Areas already assigned to these courses. This review is also necessary as the General Studies program evolves.

AREA(S) PROPOSED COURSE WILL SERVE: A course may be proposed for more than one core or awareness area. Although a course may satisfy a core area requirement and an awareness area requirement concurrently, a course may not be used to satisfy requirements in two core or awareness areas simultaneously, even if approved for those areas. With departmental consent, an approved General Studies course may be counted toward both the General Studies requirements and the major program of study.

5.) PLEASE SELECT EITHER A CORE AREA OR AN AWARENESS AREA:

Core Areas: **Select core area...** Awareness Areas: **Select awareness area...**

6.) **On a separate sheet, please provide a description of how the course meets the specific criteria in the area for which the course is being proposed.**

7.) DOCUMENTATION REQUIRED

☒ Course Description
☒ Course Syllabus
☒ Criteria Checklist for the area
☒ Table of Contents from the textbook required and/or list or required readings/books
☒ Description of how course meets criteria as stated in item 6.

8.) THIS COURSE CURRENTLY TRANSFERS TO ASU AS:

☐ DEC prefix
☐ Elective

Current General Studies designation(s):

Effective date: **Select semester...** Course Equivalency Guide

Is this a multi-section course? ☐ yes ☐ no

Is it governed by a common syllabus? ☐ yes ☐ no

Chair/Director: Chair/Director Signature:

AGSC Action: Date action taken: ☐ Approved ☐ Disapproved

Effective Date: