

\_\_\_\_\_  
Date Mailed to ICCB

PCS/CIPS \_\_\_\_\_

Office Use Only

**SHAWNEE COMMUNITY COLLEGE**

**CURRENT COURSE CHANGES**

Submitted by: \_\_\_\_\_

Date: \_\_\_\_\_

	Current Information	Change Request
Title of Course		
Course Prefix		
Course Number		
Credit Hours		
Lecture Hours Per Week		
Lab Hours Per Week		
Repeatable (Y or N)		
Variable (Y or N)		
Effective Date		

Repeat/Variable Justification: \_\_\_\_\_

\_\_\_\_\_

Curriculum(s) in which course should be assigned: \_\_\_\_\_

Rational for this request (REQUIRED) (please attach data): \_\_\_\_\_

\_\_\_\_\_

**Approved by:**

Divisional Chair: \_\_\_\_\_

Date

C & I Committee Chair: \_\_\_\_\_

Date

Vice President of Instruction: \_\_\_\_\_

Date