University of South Carolina Upstate
New Course Request for
One-Time-Only*

School or Academic Division _____

Faculty submitting the course _____

Semester and year to be offered _____

Departmental abbreviation _____ Course number _____

Title _____ Credit _____

Pre or Co requisites _____

Course description _____
_____
_____
_____
_____

_____ _____
Faculty signature date

_____** _____
Division chair date

_____ _____
Dean date

_____ _____
Executive Vice Chancellor date

Received in records:	Initials:

**Permission to offer a course under this process is for one semester only. Courses that are to be taught on a continuing basis must be approved through faculty senate.*
*** The division has been informed of this course*

approved EAC 11-18-97 revised 9.11.07;approved Exec Ac 12.07.07