

## NEW CREDIT COURSE PROPOSAL FORM

This document is intended to assist faculty in the development of new courses and provide information as to what the Course Evaluation Subcommittee and the Chancellor's Office considers when reviewing, voting upon and approving courses. Complete all sections of this form in its entirety. It is recommended that faculty consult with the Course Evaluation Subcommittee Chair, Curriculum Committee Chair, and/or Dean of Academic Services prior to creating a course. Questions regarding this form may be directed to the aforementioned parties.

### SECTION 1: RATIONALE, EVIDENCE, AND JUSTIFICATION FOR THE PROPOSAL

The following are typical considerations of the Evaluation Subcommittee. Please be prepared to address how this course will affect:

#### STUDENTS

- |   |   |
|---|---|
| ➤ Units Available for Degree/Transfer   | ➤ Ability to meet educational goals             |
| ➤ Scheduling flexibility                | ➤ Eligibility for Priority Registration         |
| ➤ Available course offerings            | ➤ Ability to pursue more than one major         |
| ➤ Student demographics and preparedness | ➤ Contact Time as it relates to student success |
| ➤ Cost for enrollment/materials         | ➤ Maintaining full-time status (12 units)       |
| ➤ Coherent programs of study/roadmaps   | ➤ Impact on Financial Aid                       |

#### THE INSTITUTION

- |                         |                  |
|-------------------------|------------------|
| ➤ Articulation          | ➤ Alignment      |
| ➤ Scheduling Resources  | ➤ Program Review |
| ➤ Budgetary Constraints |                  |

#### ALIGNMENT WITH

- |   |                                  |
|---|----------------------------------|
| ➤ Mission of the College: CTE, Transfer, Basic Skills, etc. | ➤ California Ed Code and Title 5 |
| ➤ California Community College Chancellor's Office          | ➤ Community Needs                |

### Need of Proposed Course

Please state why the course is being introduced in terms of its utility to students. Provide both quantitative and qualitative support. Documentation must be attached to the proposal.



- ☐ Documentation of **need** is attached. ([Labor market data for LA & Orange County](#), demographics, degree requirements, etc.)  
Labor Market Information from Economic Modeling Specialists International can be obtained from Dean, Academic Services.

## Feasibility of Proposed Course

Use the prompts below, in consultation with your Department Head and Dean, to review the impact of the course proposal on programs, budget, personnel, facilities and students' ability to meet their educational goals.

### PROGRAMS

Develop a Course Rotation Plan to analyze how the proposed course will impact the department's and school's ability to offer all courses students need to complete awards within a two-year time frame.

*Double-click on green thumbtack for example of completed Course Rotation Plan. Double-click on yellow thumbtack for fillable Course Rotation Plan template.*

☐ Course Rotation Plan, including proposed course and all existing program courses, is attached.



Using the rotation plan, analyze current course section offerings, existing room availability, and the times and days you are planning to offer the course. Which other courses may have to be removed from the schedule? How will changes impact students?

Please describe how adding the proposed course impacts enrollment in the department's other course offerings. Will enrollment decrease? Provide quantitative support, including current course fill rates, number of annual awards and award recipients. For more information, contact [Institutional Effectiveness](#).

☐ Number of awards, award recipients, and fill rates for existing courses in the program(s) attached. If stand-alone, include those of other courses that have a similar role in students' educational goals.

Please explain why the proposed course will apply to said awards. If it does not apply to any awards, also explain rationale.

### STUDENT EQUITY

While the LBCC Educational Master Plan has focused on achieving equitable outcomes for student groups based primarily on racial/ethnic differences, the current Student Equity Plan broadens the student groups to include age and gender, in addition to students with disabilities (DSPS), economically disadvantaged students, foster youth, and veterans. What resources are needed to ensure disproportionately impacted students have the tools needed to succeed in the course? For more information, please refer to [LBCC Student Equity](#).

**PERSONNEL**

Analyze current teaching schedules. How will the addition of the proposed course impact full-time faculty's ability to teach core program courses? Will new faculty need to be hired? What impact may this have on learning or student success?

Analyze the impact on clerical/support staff workload. Will course require support from staff? Have staff or direct supervisor been consulted?

**FACILITIES**

Will the new course require new types of support from other areas at the college? (Student Services, Admissions and Records, Facilities, Libraries or Success Centers, etc.).

**BUDGET**

Analyze impact on department supply budget. What supplies and equipment will be required, both start-up and ongoing?

Will renovations be required? If so, what are the costs associated and how will they be funded? Are there available capital outlay funds?

Overall, what impact will this new course have on the department budget, both now and in the future?

Analyze the proposed course's impact on current Full Time Equivalent Students (FTES) and Full Time Equivalent Faculty (FTEF) plans. A starting point is to calculate the number of FTES a class at maximum class size could generate. One would then want to evaluate how this might contribute to or detract from area goals given existing FTES generations.

Complete the following to calculate FTES.

1. Calculate Weekly Student Contact Hours (WSCH)  
*Formula: Class size x Total contact hours per week*  
Include lecture and/or lab hours based on 18 weeks.

Class size maximum:   
Contact hours per week:   
**WSCH:**

2. Calculate Full Time Equivalent Students (FTES)  
*Formula: (WSCH x 17.5) ÷ 525*

**FTES:**

NOTE: The above calculations assume that class is expected to fill on average to maximum size. Class sections that deviate from this size will impact efficiency.

Referencing the proposed course's FTES and FTEF, how will the new course impact efficiency in your area?

### SUMMARY

Summarize the feasibility in terms of impact on programs, budget, personnel, facilities and students' ability to meet their educational goals, based on your responses and discussions of the above.

## **Benefit of Proposed Course**

How will this new course benefit students in our [service area](#)?



Explain how this benefit will be measured.

Please paste the portions of the LBCC MISSION which the proposed course fulfills ([AR. 4005.2](#)), from the [LBCC Planning website](#). Explain how the course will contribute to the mission of the institution.

### **VALUES**

### **GOALS**

Please paste portions of the LBCC GENERAL EDUCATION OUTCOMES to which this course maps, from [LBCC Outcomes Assessment](#):

### **GENERAL EDUCATION OUTCOMES**

If the new course is not proposed for GE, please paste portions of the PROGRAM OUTCOMES to which this course maps.

### **PROGRAM OUTCOMES**

## SECTION 2: CTE COURSE PROPOSALS ONLY

CTE courses must be recommended by the program Advisory Committee whose membership must be approved by the Vice President of Academic Affairs.

☐ Advisory Committee meeting minutes include date, time, location, membership, attendees **AND** make specific reference to the proposed course and the committee's recommendation.

The course has been developed with state grant funds for economic development. ☐ Yes ☐ No

If yes, please explain:

The proposed course comes within the scope of state and/or federal laws other than the Education Code and California Administrative Regulations for the Community Colleges and, therefore, must comply with those laws. ☐ Yes ☐ No

If yes, please explain:

How does the course assist students in developing "soft skills" or career readiness?

How does the course align with any non-credit curriculum offered in the pathway?

**NOTE:** Job outlook and workforce projection must be included in statement of need.

.....  
**PLEASE CONTINUE TO SECTION 3.**  
.....

### SECTION 3: COURSE CATALOGUE DESCRIPTION

SUBJECT & CATALOGUE NUMBER (e.g. HIST 10): See <i>Course Band</i> definitions under <i>Section 6: Course Impact</i>	
ABBREVIATED DESCRIPTIVE TITLE (19 characters max):	
FULL DESCRIPTIVE TITLE (40 characters max):	

Discipline(s) to which course belongs (see [Chancellor's Office Disciplines List](#)):

--

Check if course is one of the following:

- ☐ Work Experience  
☐ Experimental  
☐ Special Topics

### Course Units/Hours

Please supply the following information, taking into account the definitions below:

<input type="checkbox"/> Variable Hours (check if applicable) Must be noted in the Catalogue Description			
<b>Min Hrs:</b>		<b>Max Hrs:</b>	
<b>Min Units:</b>		<b>Max Units:</b>	

In-Class Hours	Number of Hours
Lecture Hours	
Lab Hours	
Out-of-Class Hours	Number of Hours
Homework Hours	
Other Out-of-Class Hours Note: Required off-campus activities must be noted in Catalogue Description.	
<b>Total Learning Hours</b>	
<b>Total Units</b>	



<input type="checkbox"/> Units and hours are commensurate
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Provide a descriptive title for the *Other Out-of-Class* Activities:


## Definitions

Term	Definition	Ratio of In-Class to Out-of-Class Hours
<u>LECTURE</u>	An instructional method that primarily uses full-class or group content delivery. May include some small group work, presentations, and discussion.	1 : 2
<u>LAB</u>	An instructional method where students primarily work independently or in groups to develop or practice skills in a laboratory, workshop, studio, court, field, or other specialized instructional space. Instructor supervised and directs activity at the student or small group level for most of the class period. Work experience: Students will earn 1 unit for every 75 hours of paid work or every 60 hours of unpaid work.	3 : 0

Definitions derived from multiple sources, including Title 5, PCAH.

LECTURE, 54 HRS = 1 UNIT			
UNITS	CONTACT HOURS	HOMEWORK HOURS	TOTAL STUDENT LEARNING HOURS
0.50	9	18	27
1.00	18	36	54
1.50	27	54	81
2.00	36	72	108
2.50	45	90	135
3.00	54	108	162
3.50	63	126	243
4.00	72	144	216
4.50	81	162	243
5.00	90	180	270
5.50	99	198	297
6.00	108	216	324
6.50	117	234	351
7.00	126	252	378
7.50	135	270	405
8.00	144	288	432

ACTIVITY, LAB W/O HOMEWORK, 54 HRS = 1 UNIT			
UNITS	CONTACT HOURS	HOMEWORK HOURS	TOTAL STUDENT LEARNING HOURS
0.50	27	0	27
1.00	54	0	54
1.50	81	0	81
2.00	108	0	108
2.50	135	0	135
3.00	162	0	162
3.50	189	0	189
4.00	216	0	216
4.50	243	0	243
5.00	270	0	270
5.50	297	0	297
6.00	324	0	324
6.50	351	0	351
7.00	378	0	378
7.50	405	0	405
8.00	432	0	432

Definitions derived from [Chancellor's Office Units and Hours Chart](#).



## SECTION 4: GENERAL COURSE OUTLINE

### Optional Course Outline Criteria

Please check all of the following boxes that apply to the proposed course.

#### Enrollment Options

☐ Students may repeat for credit. Applies to courses meeting one of the following criteria:

- a) Required for the major and student are required to repeat the course in their freshmen and sophomore years at transfer institution
- b) Intercollegiate athletics
- c) Intended for vocational or academic competition
- d) Work Experience. Students may enroll up to 4 semesters (16 units maximum) at instructor's discretion.

#### Correlated Courses

☐ Honors Addendum is attached.

☐ This course is/will be cross-listed with:

☐ Laboratory Course

#### Materials Fee

☐ Materials Fee (Complete & Attach [Form](#) with Proposal)

#### Distance Education

Please indicate whether you intend to offer this course as either of the following. If so, a Distance Learning Addendum must be completed and attached.

- ☐ Hybrid/ Mixed Modalities  
☐ Online Modality

☐ Distance Learning Addendum attached

### Required Course Outline Criteria

Please verify that the proposed course meets ALL of the following criteria by checking ALL of the following boxes.

#### Student Learning Outcomes (SLOs)

Strong course proposals should start with the development of learning outcomes and objectives. SLOs and corresponding Assessment Methods must be approved by the ASLO committee (see *Section 9: Approvals*). Please submit course SLOs for approval at this link: <http://archive.lbcc.edu/outcomesassessment/newslo.cfm>

- ☐ SLOs and Assessment Methods have been submitted to the ASLO subcommittee online.
- ☐ Outcomes and objectives align with course content and assignments.
- ☐ Outcomes begin with active verbs from Bloom's Taxonomy and express what students are able to DO by the end of the course.
- ☐ Course learning *objectives* are more discrete than and feed into broader learning *outcomes*.
- ☐ SLOs are unique to the course/do not duplicate those of other courses in the program.

#### Content

- ☐ Course content has been numbered and listed as topics and subtopics.
- ☐ Course content aligns with course learning outcomes and objectives.
- ☐ Course content is independent of a specific textbook.

#### Methods of Instruction

- ☐ Methods and their relation to content are described rather than simply stated.
- ☐ Methods are those typically utilized to assist students in achieving course outcomes.
- ☐ Instructional Methods for Lab are described.

### Assignments

- ☐ Assignments and their connection to content are described.
- ☐ Evidence of appropriate student workload/rigor for units (1 Hour Lecture: 2 Hours Out-of-Class).
- ☐ Assignments necessitate and foster critical thinking (refer to Bloom's taxonomy).
- ☐ Assignments described illustrate how student learning outcomes can be achieved.

### Evaluations

- ☐ Describes criteria upon which listed assignments will be graded.
- ☐ Each evaluation listed has a corresponding assignment described on the assignments page, and vice versa.

☐ Outcomes/objectives, content, methods of instruction, assignments and evaluations described are integrated and align across each area.

### Representative Texts and Other Materials

Transferrable courses must list a textbook.

- ☐ Course textbooks are less than 5 years old.

If not, explain why older publications are required:

- ☐ Format provided in Course Outline database has been followed.
- ☐ Instructor-developed materials listed indicate frequency with which they are updated.

### Comparable LBCC Courses

It is incumbent upon course authors to seek out curricula offered in other departments which may overlap with that of the proposed course and to confer with departments which may have similar subject matter expertise. This ensures the college does not offer redundant courses which may cause confusion for students. It also promotes collegial collaboration. One way to do so is to search the college catalog using key words from your course description to assess whether there are courses with overlapping content.

Is there a course or courses with similar content being offered in another department? ☐ Yes ☐ No

If yes, which courses?

Are there other departments which may have similar subject matter expertise? ☐ Yes ☐ No

If yes, which department(s)?

- ☐ If applicable, documentation of contact made and evidence of their support for the course proposal is attached.

If applicable, please describe the nature of any objections to the new course proposal:

## SECTION 5: CONTENT REVIEW OF REQUISITES AND ENROLLMENT LIMITATIONS

To add requisites to a course, one must provide rationale and evidence of need, including exit skills in the requisite or advisory course. It is incumbent upon faculty to demonstrate that students are highly unlikely to succeed in acquiring the proposed course's content without the outcome & objective skills in the requisite course.

**NOTE:** Communication or computation requisites (writing or math courses) listed on courses outside of those disciplines currently require statistical validation.

☐ Addition of requisites requires completion of the *Requisite Validation Form*. Please check to confirm that you have completed **one** *Requisite Validation Form* for **each** requisite AND have attached all forms for submission.

What impact will these **requisites** have on other courses, sequence scheduling, and student's ability to meet their educational goals?

☐ Instructor Consent (Must be noted in Catalogue Description)

Please describe the nature of Instructor Consent/any limitations on enrollment.

## SECTION 6: COURSE IMPACT

### Course Band

Please select the proposed course's band and definition, to ensure alignment with the intent of the course:

### Roles

☐ This course is **program applicable** because it will be included in one or more awards and/or GE breadth patterns.

Please check all roles the course is intended to fulfill:

- ☐ LBCC-GE AA/AS Degree (Plan A)
- ☐ CSU-GE Breadth (Plan B)\*\*
- ☐ IGETC Request/Status (Plan C)\*\*
- ☐ CSU Transferable\*\*
- ☐ UC Transferable\*\*
- ☐ Associate Degree(s) for Transfer\*\*
- ☐ Certificate/Achievement (18+ U)
- ☐ Certificate/Accomplishment (<18 U)

☐ Draft program(s) of study show how the course fits in its various roles and are attached.

Please be advised that faculty wishing to articulate courses should initiate contact with the receiving institution's department faculty.

Note: Addition of new courses to programs and GE patterns require Associate Degree/General Education Subcommittee's approval.

\*\*Requires Articulation Officer's signature. See *Section 9: Approvals*.

## Program-Applicable Courses

Please identify all program awards (degrees and/or certificates) for which this course is intended to be required or elective.

Double click orange thumbtack to view example of completed table. For additional space, double-click blue thumbtack and attach completed table.



GE PATTERN	GE AREA CODE (e.g. B1)

AWARD TYPE	TITLE	OPTION

☐ Additional awards to which this course will apply exist, and program impact review has taken place.

## Stand-Alone Courses

☐ This is a **stand-alone** course, which therefore does not apply to a program or award.

Students can count a maximum of 17 units of stand-alone courses to fulfill certificate, degree major, or area of emphasis requirements.

Provide evidence that this course should be offered as stand-alone:

.....  
**PLEASE CONTINUE TO SECTION 7.**  
.....

## SECTION 7: TRANSFERABILITY AND COMPARABLE COURSES

**NOTE:** Any course proposed for transfer should be discussed with the receiving institution AND must involve the Articulation Office prior to submission ([AR. 4005.5](#)). Articulation Office can assist in identifying areas with articulation opportunities.

If proposed for transfer, how does the course compare to courses in [Region 8](#) (our region) in terms of content breadth and depth? Use [C-ID courses](#) and courses listed on [ASSIST.org](#) for comparison. CTE courses should be compared across the [LA and OC Regional Consortium](#).

### Criteria for Transfer

Please check all of the following boxes that apply.

If being proposed for transfer, the course:

- ☐ Is offered as lower division major preparation among the **five** institutions to which LBCC students transfer most. See the *Highest Rate of Transfer* sections below.
- ☐ Has a C-ID Number and adheres to the minimum standards, including units and instructional time. Complete additional information below.
- ☐ Does not meet these criteria and provides students unique transfer opportunities. Please provide rationale and need for offering a course that does not transfer locally and complete the *Target Institution(s) for Major or Articulation* section:

- ☐ ASSIST.org documentation has been attached.

### C-ID Unit Value (if applicable)

C-ID descriptor unit "minimums" reflect the minimum number of units that CCC/CSU (DIG) discipline faculty have collegially agreed reflect the instructional time necessary to cover the content in the descriptor. [The C-ID descriptor](#) is assumed to be the essential or "minimum" content covered in a course to be eligible for C-ID. **C-ID Eligibility:**

C-ID Number:

C-ID Minimum Units:

C-ID Pre/Corequisites or Advisories:

- ☐ Proposed course aligns with C-ID unit value and requisites (if applicable).

## Transfer Institution Equivalent Course Unit Values (4-year University, transfer-level courses only)

### *"Highest Rate of Transfer" Schools: CSU System per Institutional Effectiveness.*

Complete this section if the proposed course is intended to transfer to the CSU system. Please identify similar courses offered at target transfer institutions. Empty fields for a university will imply that no equivalent course is offered at that institution.

#### CSU Long Beach

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

#### CSU Dominguez Hills

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

#### CSU Los Angeles

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

#### CSU Fullerton

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

#### CSU Pomona

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

***"Highest Rate of Transfer" Schools: UC System per Institutional Effectiveness***

Complete this section if the proposed course is intended to transfer to the UC system. Please identify similar courses offered at target transfer institutions. Empty fields for a university will imply that no equivalent course is offered at that institution.

**UC Los Angeles**

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

**UC Irvine**

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

**UC Santa Barbara**

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

**UC Berkeley**

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

**UC Riverside**

☐ Not applicable for major

Course ID:  Title:

Articulation opportunity exists: ☐ Y ☐ N

**UNITS:**

**LECTURE** hours (term):

**LAB** hours (term):

**Target Institution(s) for Major or Articulation**

Complete this section if Check Box 3 under *Criteria for Transfer* is checked. Please identify similar courses offered at target transfer institutions. Empty fields for a university will imply that no equivalent course is offered at that institution.

**Major:****(Other Institution):**

Course ID:

Title:

Articulation opportunity exists:

☐**Y**☐**N****UNITS:****LECTURE** hours (term):**LAB** hours (term):**(Other Institution):**

Course ID:

Title:

Articulation opportunity exists:

☐**Y**☐**N****UNITS:****LECTURE** hours (term):**LAB** hours (term):**(Other Institution):**

Course ID:

Title:

Articulation opportunity exists:

☐**Y**☐**N****UNITS:****LECTURE** hours (term):**LAB** hours (term):**(Other Institution):**

Course ID:

Title:

Articulation opportunity exists:

☐**Y**☐**N****UNITS:****LECTURE** hours (term):**LAB** hours (term):

Provide a summary comparison between the proposed course's configuration and the configuration of the 4-year university comparable courses you listed in the preceding UC, CSU and Other Transfer Institution sections. Explain and cite research to show how the proposed course sustains or exceeds student-centered outcomes.



## Community College Equivalent Course Unit Values

If proposal is intended for General Education (GE) or an emerging field use this section.

**GE proposals:** Explore similar courses in the Community College System that have already been approved for the GE area for which the course is intended. Review course outlines of record (COR) for approved GE courses at other CA community colleges. The COR may provide examples on how the course content address GE criteria.

List only currently active courses. Empty fields for a given school will imply that no equivalent course is offered.

**Emerging fields:** Explore similar active courses and consult with regional consortium.

If you would like to include information beyond what is prompted below, please attach additional data and elucidate.

### Cerritos College

Course ID:	<input type="text"/>	Title:	<input type="text"/>
<b>UNITS:</b>	<input type="text"/>		
<b>LECTURE</b> hours (term):	<input type="text"/>		
<b>LAB</b> hours (term):	<input type="text"/>		

### Cypress College

Course ID:	<input type="text"/>	Title:	<input type="text"/>
<b>UNITS:</b>	<input type="text"/>		
<b>LECTURE</b> hours (term):	<input type="text"/>		
<b>LAB</b> hours (term):	<input type="text"/>		

### El Camino College

Course ID:	<input type="text"/>	Title:	<input type="text"/>
<b>UNITS:</b>	<input type="text"/>		
<b>LECTURE</b> hours (term):	<input type="text"/>		
<b>LAB</b> hours (term):	<input type="text"/>		

### Harbor College

Course ID:	<input type="text"/>	Title:	<input type="text"/>
<b>UNITS:</b>	<input type="text"/>		
<b>LECTURE</b> hours (term):	<input type="text"/>		
<b>LAB</b> hours (term):	<input type="text"/>		

### **(Other Institution):**

<hr/>			
Course ID:	<input type="text"/>	Title:	<input type="text"/>
<b>UNITS:</b>	<input type="text"/>		
<b>LECTURE</b> hours (term):	<input type="text"/>		
<b>LAB</b> hours (term):	<input type="text"/>		

### Statewide/Regional Success Rates (Optional)

☐ If there are statewide/regional success rates available or data you wish to provide for the comparable course to aid in review of the proposed course, attach any reports or supplemental data in Attached Files.

### Mandates

Are there any mandates or regulations that justify the **number of units** as proposed for this course? ☐ Yes ☐ No

If yes, please identify and describe them here:

Are there any mandates or regulations that justify the **class size** proposed for this course? ☐ Yes ☐ No

If yes, please identify and describe them here:

### **SECTION 8: ALTERNATIVE APPROACHES FOR STUDENT SUCCESS**

Have you considered alternative model programs or other approaches that may also yield positive outcomes for the students?  
For example: workshop, non-credit course, additional lab hours, existing courses or services, innovative instructional approaches, etc.

☐ Yes ☐ No

Please explain:

### **REVIEW OF LIBRARY RESOURCES**

☐ Please confirm that the LBCC library has sufficient resources to support student success in this program.

If you have questions, the contact for Access Services (textbooks, circulation, interlibrary loan, databases) is Nenita Buenaventura ([nbuenaventura@lbcc.edu](mailto:nbuenaventura@lbcc.edu)) and the contact for the Library Collection Development and Acquisitions Unit is Shamika Simpson ([ssimpson@lbcc.edu](mailto:ssimpson@lbcc.edu)).

If you have requests, please use the links to the forms below to inform library staff of your needs.

To request textbooks, databases or other course materials: [Click this link](#)

To request resources for research, assignments, general interest and information needs: [Click this link](#)

.....  
**PLEASE CONTINUE TO SECTION 9.**  
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## SECTION 9: APPROVALS

ALL of the following signatures are required prior to submission.

Date department-wide discussion/approval of the course took place:

Meeting minutes or other documentation is attached.



**Faculty Author:** I have completed all portions of this document, as applicable:

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**FA Signature:**

**Department Head:** I have reviewed and discussed this new course with the department faculty.

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**DH Signature:**

**Area Dean:** I have reviewed the proposal and will support this course; the school has adequate resources.  
I have reviewed the proposal and there are concerns regarding feasibility.

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**AD Signature:**

**Articulation Officer** This course is well-suited for transfer and/or articulation.  
**(if transferable):** This course does not meet the criteria for transfer and/or articulation.

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**AO Signature:**

**SLO Coordinator:** SLO(s) and corresponding Assessment Method(s) have been received and approved by ASLO.

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**SLO Co. Signature:**