

NEW YORK UNIVERSITY
THE STEINHARDT SCHOOL OF EDUCATION
FACULTY SUBCOMMITTEE ON COURSES AND PROGRAMS (SCP)
MUSIC AND PERFORMING ARTS PROFESSIONS (CCP)

(A Subcommittee of the Faculty Academic Affairs Committee)

COURSE PROPOSAL FORM

INSTRUCTIONS

1. This form is to be filled out for all new courses, both undergraduate and graduate. Complete information should be provided under every item. Please pay particular attention to items 10 through 13. A separate detailed Syllabus is preferred. See faculty CCP website for what should be included in the syllabus or course outline.
<http://education.nyu.edu/music/curriculum/>
2. A draft proposal is to be submitted for review by your department's curriculum committee. Once the proposal is approved and signed by your Chair, a copy is sent to the Office of Academic Affairs (OAA) for administrative clearance. Clearance does not involve an academic content review. It involves checking for course duplication, and obtaining information required by the University Registrar and the New York State Education Department
3. Administrative clearance is reported to the SCP where the course is ratified. A course number will then be assigned by the School's Registrar and the course is officially entered into the record.

THE STEINHARDT SCHOOL OF EDUCATION|
MUSIC AND PERFORMING ARTS PROFESSIONS
COURSE PROPOSAL FORM

Date _____

1. Department Music and Performing Arts Professions

Program _____

2. Course Number _____ Clock Hours _____ Credits _____

If additional hours are needed please explain:

3. Course Title: _____

4. Catalog Description: _____

5. Offered: Academic Year _____ Summer _____ Summer Only _____

Off-Campus (place) _____

Other (explain) _____

6. Course Stipulations:

A. Curricular purpose of course (check one or more):

Program requirement _____ for Program _____

Program elective _____ Service course _____

Other (explain) _____

B. Student population:

Program/Departmental majors _____

Non-program/Non-departmental majors _____

Undergraduate _____ Graduate _____

Other (explain) _____

If special permission is required, explain _____

C. Prerequisite/corequisite coursework _____

D. Upper limit of class size _____ Specific reason for limit _____

7. Staff and facilities requirements:

A. Availability of qualified person (check one or more):

Full time: In Program _____ In Department _____

In SCHL. OF ED. _____

Adjunct _____ Other (explain) _____

B. Type of room needed _____

C. Special equipment needed _____

D. Any special fees proposed (explain) _____

8. What are the major instructional techniques to be used in the proposed course? Please indicate percentages.

Clinical _____ Laboratory _____

Colloquium _____ Lecture _____

Distance Learning _____ Recitation _____

Fieldwork _____ Seminar _____

Independent Study _____ Studio _____

Individualized Instruction _____ Workshop _____

9. Need for the course:

A. What need will be met by the proposed course? Check one or more of the following and give evidence in support of each item checked.

1. Part of a proposal for a new program _____

Evidence _____

2. New course in an existing program _____

Evidence _____

3. Other (explain)_____

B. Describe the potential student population for the proposed course:

C. Provide evidence that there will be sufficient enrollment:

10. Relationship of the proposed course to existing offerings in SCHL, OF ED, or other schools of the University:

To prevent unnecessary course replication, similarity, and overlap, please consult with members of your program and department and any other units within the School or University that offer courses containing content included in the proposed course.

Please feel free to consult with any member of the Faculty Subcommittee on Courses and Programs regarding the nature and extent of consultation appropriate to the development of your proposal.

A. List existing course(s) that may have some overlapping content:

Course Title

Department

B. List the individuals with whom you consulted about possible overlapping course content:

Name _____ Department _____ Date _____

C. Names, signatures, and comments of chairperson(s) of department(s) in which similar courses are offered.

Name	Signature	Date	Comments on Overlap
			None: ____ Minimum: ____ Extensive: ____
			None: ____ Minimum: ____ Extensive: ____
			None: ____ Minimum: ____ Extensive: ____

* If a department chair checks minimal or extensive overlap on the course proposal form, a separate statement must be written describing the nature of the overlap.

D. If you have determined that no consultation is required, check here _____.

11. Faculty and student involvement:

What was done in planning the course, who participated, how, and what modifications were made throughout the course design effort?

12. Describe how you will document the outcomes of a course, reflect on its merits, and plan for future revisions.
13. Please attach a course outline to this proposal. Since the course outline is intended to convey to the students a sense of purpose and direction about the course, it should include the following elements:
- A. Course objectives stated in terms of expected student accomplishments/outcomes;
 - B. Outline of course content, as a list of suggested topics scheduled for the duration of the term. In the absence of a list, please indicate the relative weight for each topic in terms of percentage of time devoted to it;
 - C. Major teaching-learning activities, assignments, and/or projects;
 - D. List of readings, both required and recommended; and
 - E. Criteria and procedures for assessing the achievements of objectives. The evaluation plan must be consistent with the course objectives. (An examination may be appropriate for assessing certain objectives; an out-of-class project for others).

14. Prepared by: _____
(Signature of Proposer) (Date)

15. Approved by Faculty _____
(Signature MPAP Faculty CCP Chair) (Date)

16. Approved by: _____
(Signature of Department Chair) (Date)