Form UCC1
Florida Department of Education
Statewide Course Numbering System

NEW COURSE TRANSMITTAL FORM
(explanations on next page)

PART 1: TO BE COMPLETED BY THE INSTITUTION

Institution Name: University of Florida	Institutional Code: 001535	Instructional Unit or Department Name, Department Code:

Recommended SCNS Course Identification:

Discipline (SMA) ____ ____ ____   Prefix ____ ____ ____   Level ____   Course Number ____ ____ ____   Lab Code _____

Institution's Course Title: _____

Effective Term and year course will first be offered: _____

Amount of Credit:	Contact hour base _____ or Headcount _____	If Repeatable Credit or Variable Credit: _____ total repeatable credit allowed
Course Description (attach a course syllabus):		_____ minimum / _____ maximum credit within a semester
		Mark all that apply: Rotating Topic ☐ yes ☐ no / S/U Only ☐ yes ☐ no / Repeatable for Credit ☐ yes ☐ no

Prerequisites: (This form does not update ISIS or registration prerequisite checking.)

Corequisites:

All faculty teaching this course have completed at least 18 graduate semester hours in the teaching discipline and hold at least a master's degree.   ☐ Yes   ☐ No

Degree Type (Mark all that apply.):
☐ Associate of Arts   ☐ Baccalaureate   ☐ Graduate Study   ☐ Other (specify):

Category of Instruction: ☐ Introductory   ☐ Intermediate   ☐ Advanced

Department Contact, Telephone Number, Email Address and PO Box: (Date)

College Contact, Telephone Number, Email Address and PO Box: (Date)

PART 2: TO BE COMPLETED BY THE FACULTY DISCIPLINE COMMITTEE REPRESENTATIVE

Approved Course Classification (Prefix, Number, Lab Code):

If not the same as recommended by institution, please explain:

SCNS Course Title (if new): _____

Decade Title (if new): _____

Century Title (if new): _____

Signature, Faculty Discipline Committee Representative: _____   Date: _____

New Course UCC-1 Form   Instructions for Completion of Part 1

The New Course Transmittal form is used for transmitting new course information to the Statewide Course Numbering System (SCNS):

1. Institutional **RECOMMENDATIONS** regarding prefixes and course numbers for new courses.
2. Additional course information to be recorded in the SCNS inventory.
3. Supporting documentation for use by the faculty discipline coordinator in reviewing and assigning a prefix and course number.

All information requested on this form is necessary for the efficient and timely maintenance of the SCNS inventory. Thus, all items on Part I must be completed and the course syllabus attached before it is forwarded to the Florida Department of Education (DOE).

The following instructions and definitions are provided to clarify items to be completed on the New Course Transmittal form.

Department Name/Department Code: Academic unit and code number of department code responsible for teaching the course. Use complete name, not abbreviations or acronyms.

Recommended SCNS Course Identification: (Subject to approval by the appropriate Faculty Discipline Coordinator based on SCNS taxonomy and course classification system.)

Discipline (SMA): A three-digit code representing a broad Subject Matter Area. This code can be obtained from the SCNS handbook.

Prefix: A three-letter code indicating placement of a course within the discipline.

Level: A one-digit code preceding the course number that indicates the level (e.g., freshman, sophomore, etc.) at which the course is to be taught. This number is to be recommended by the institution according to state and institutional policy.

Course Number: A three-digit code indicating the specific content of the course based on the SCNS taxonomy and course equivalency profiles.

Lab Code: This code is left blank if the course is a lecture course (has no laboratory component). The letter "C" may be used to indicate a combination of lecture and laboratory. An "L" indicates a laboratory course for which there may or may not be an associated lecture course.

Institution's Course Title: The title of the course as it is to appear in the catalog.

Effective Date: Provide term and year in which the course will be first offered.

Number of Credits: The amount of credit is regulated by Rule 6A-10.033, FAC.

Contact Hours: "Base" contact hours are determined by dividing the total number of classroom meeting hours per semester by the number of weeks in the semester. For example,

$$\frac{8 \text{ (hours class meets per week) x 4 (number of weeks class meets)}}{16 \text{ (number of weeks in semester)}} = \frac{32}{16} = 2 \text{ Base Contact Hours}$$

"Headcount" contact hours are determined by dividing the average number of hours the instructor meets with one student during the semester by 3 times the number of weeks in the semester. For example,

$$\frac{1 \text{ (average number hours per student) x 16 (number weeks in semester)}}{3 \text{ x 16 (number of weeks in semester)}} = \frac{16}{48} = .33 \text{ Headcount Contact Hours}$$

Course Description: Provide a brief narrative description of the course content. Attach a course syllabus and outline of major topics, readings and grading criteria.

Mark All That Apply: Mark 'yes' or 'no' if a course is to be rotating topic, S/U grading only or is repeatable for credit.

Prerequisites: Indicate prefix and number or content of courses and other requirements that must be satisfied prior to enrollment in this course.

Corequisites: Indicate prefix and number or content of courses and other requirements that must be taken concurrently with this course.

Faculty Credentials: Indicate yes or no if the faculty teaching this course have completed at least 18 graduate semester hours in the teaching discipline and hold at least a master's degree.

Degree Type: Check all appropriate categories. For category of "Other," describe the intended registrants, e.g., law enforcement officers, registered nurses, retail merchants, etc.

Category of Instruction: Introductory courses are those that require no prerequisites and are general in nature. Intermediate courses require some prior preparation in a related area. Advanced courses require specific competencies or knowledge relevant to the topic prior to enrollment.

Department Contact and Telephone Number: Name, phone and PO Box number.

College Contact and Telephone Number: Name, phone and PO Box number.

Approvals:
Submit the completed form using the online tracking system at approval.ufl.edu. Appropriate approvals and notifications will be made through the online tracking system.

Department Chair
College Dean: Approval of the college-level curriculum committee or, if no such committee exists, approval of the college.
Graduate Dean: **All** graduate level courses must be approved by the Graduate Curriculum Committee.

Do Not Complete Part II.

Should you have questions concerning the completion of this form, please call the Office of the University Registrar at 352-392-1374, ext. 7237. Call the Graduate School at 352-392-1282 for questions concerning graduate courses. Questions concerning the online system should be emailed to approval@ufl.edu.