

**UNIVERSITY OF HAWAII AT MĀNOA
UHM-2 FORM (TO MODIFY/RETIRE A COURSE)**

See [Guidelines](#) for instructions and deadlines. Submit forms (one course per form) to uhmcrse@hawaii.edu.

1. Transaction Type <input type="checkbox"/> Modify <input type="checkbox"/> Retire (formerly delete)	2. Course Subject and Number	3. Existing Full Course Title	4. Effective Term & Year of Change <input type="checkbox"/> FA ____ <input type="checkbox"/> SP ____ <input type="checkbox"/> SU ____			
5. Existing Honors Counterpart <i>Signature of Honors Program required in Box 13. To remove honors counterpart status, also check Box 9m.</i>		6. Existing Cross-Listed Course(s) <i>Signature of cross-listed department(s) & Dean(s) required in Box 13 and in "Approved By" section. To remove cross-listed status, also check Box 9m.</i>				
7a. Existing Gen Ed Diversification, Foundations, or HSL Designation <i>If none, write "none." If requesting a change, also fill out 7b</i>			GEO Use: <input type="checkbox"/> Continue <input type="checkbox"/> Add ____ <input type="checkbox"/> Remove <input type="checkbox"/> Change to: ____			
7b. If adding/changing Gen Ed Designation, please indicate requested designation: DA DH DL DS DB DP DY DB+DY DP+DY FGA FGB FGC FQ FW HSL						
8. Existing Blanket Statement: <i>(If none, write "none." For cross-listed courses, include all applicable blanket statements. If requesting a change to the blanket statement, submit memo).</i>						
9. Other Requested Changes <i>(Check all that apply. For each change requested, fill in Existing and Proposed Data. Read instructions carefully before completing; use additional sheets if needed)</i>						
	Change Type		Existing Data (Check Banner to confirm)		Proposed Data (Enter data as it should appear <u>after</u> change)	
<input type="checkbox"/>	a. Course Subject and/or Number					
<input type="checkbox"/>	b. Course Title <i>(for alpha courses, attach separate sheet and specify titles for <u>each</u> alpha)</i>		(1)		(1)	
	(1) Full Course Title					
<input type="checkbox"/>	(2) Banner Course Title <i>(30 characters max, including spaces and punctuation)</i>		(2)		(2)	
<input type="checkbox"/>	c. Frequency <i>(check all that apply)</i>		<input type="checkbox"/> Fall Semester	<input type="checkbox"/> Summer Semester	<input type="checkbox"/> Fall Semester	<input type="checkbox"/> Summer Semester
			<input type="checkbox"/> Spring Semester	<input type="checkbox"/> Alternate years	<input type="checkbox"/> Spring Semester	<input type="checkbox"/> Alternate years
<input type="checkbox"/>	d. Offering Status		<input type="checkbox"/> Experimental		<input type="checkbox"/> Regular	
<input type="checkbox"/>	e. Grade Option(s) <i>(check all that apply)</i>		<input type="checkbox"/> Letter Grade	<input type="checkbox"/> Satisfactory/Unsatisfactory (500, 700, 800 only)	<input type="checkbox"/> Letter Grade	<input type="checkbox"/> Satisfactory/Unsatisfactory (500, 700, 800 only)
			<input type="checkbox"/> CR/NC	<input type="checkbox"/> Honors (Medicine only)	<input type="checkbox"/> CR/NC	<input type="checkbox"/> Honors (Medicine only)
<input type="checkbox"/>	f. (1) Contact Hours <i>(per semester)</i>		(1)		(1)	
	(2) Number of Credits		(2)		(2)	
<input type="checkbox"/>	(3) Repeat Limit		(3)		(3)	
	(4) Credit Limit		(4)		(4)	
<input type="checkbox"/>	g. Schedule Type <i>(see guidelines for definitions)</i>		<input type="checkbox"/> CLN <input type="checkbox"/> FLD <input type="checkbox"/> LAB <input type="checkbox"/> LED <input type="checkbox"/> PRA <input type="checkbox"/> STU	<input type="checkbox"/> CLN <input type="checkbox"/> FLD <input type="checkbox"/> LAB <input type="checkbox"/> LED <input type="checkbox"/> PRA <input type="checkbox"/> STU	<input type="checkbox"/> CLN <input type="checkbox"/> FLD <input type="checkbox"/> LAB <input type="checkbox"/> LED <input type="checkbox"/> PRA <input type="checkbox"/> STU	<input type="checkbox"/> CLN <input type="checkbox"/> FLD <input type="checkbox"/> LAB <input type="checkbox"/> LED <input type="checkbox"/> PRA <input type="checkbox"/> STU
			<input type="checkbox"/> DRR <input type="checkbox"/> INV <input type="checkbox"/> LEC <input type="checkbox"/> LEL <input type="checkbox"/> SEM <input type="checkbox"/> THE	<input type="checkbox"/> DRR <input type="checkbox"/> INV <input type="checkbox"/> LEC <input type="checkbox"/> LEL <input type="checkbox"/> SEM <input type="checkbox"/> THE	<input type="checkbox"/> DRR <input type="checkbox"/> INV <input type="checkbox"/> LEC <input type="checkbox"/> LEL <input type="checkbox"/> SEM <input type="checkbox"/> THE	<input type="checkbox"/> DRR <input type="checkbox"/> INV <input type="checkbox"/> LEC <input type="checkbox"/> LEL <input type="checkbox"/> SEM <input type="checkbox"/> THE
<input type="checkbox"/>	h. (1) Major Restrictions <i>(as they should appear in the Catalog)</i>		(1)		(1)	
	(2) Banner Codes of Acceptable Majors		(2)		(2)	
<input type="checkbox"/>	i. Class Standing Restrictions					
<input type="checkbox"/>	j. Co-requisite Course(s)					
<input type="checkbox"/>	k. (1) Prerequisite Course(s)		(1)		(1)	
	(2) Prerequisite Grade Requirement		(2)		(2)	
<input type="checkbox"/>	l. Catalog Description <i>(35-word maximum. Do not include/count other course information such as frequency, grade option, and prerequisite courses.)</i>					
<input type="checkbox"/>	m. Cross-listed/Honors Course(s) <i>(Signatures required on page 2. Submit syllabus for all courses except ~99.)</i>					
10a. Description of Change(s)			10b. Justification of Change(s) <i>(attach additional sheets if needed)</i>			
11. Syllabus Attached <i>(except ~99 courses and retirements)</i> <input type="checkbox"/> Yes <input type="checkbox"/> Not Needed			12. List other UH departments and campuses that have been consulted.			

UNIVERSITY OF HAWAI‘I AT MĀNOA
UHM-2 FORM (MODIFY/RETIRE A COURSE)

See [Guidelines](#) for instructions and deadlines. Submit forms (one course per form) to uhmcrse@hawaii.edu.

13. Cross-listed Department(s)/Honors Program (for SUST cross-listing, see Guidelines)			
Department/Unit	Chair/Director	Signature	Date
Department/Unit	Chair/Director	Signature	Date
14. Requested By			
I certify that the student learning objectives for the course are consistent with the learning objectives of each program under which the course is listed.			
Department/Unit	Chair/Director	Signature	Date
Approved By			
1 st College or School	Dean or Designee	Signature	Date
2 nd College or School	Dean or Designee	Signature	Date
General Education Office (for courses numbered 100-499)			
Director or Designee		Signature	Date
Graduate Division (for Grad Division-administered courses)			
Dean or Designee		Signature	Date
Office of the Provost			
Vice Chancellor for Academic Affairs or Designee		Signature	Date