**CURRICULUM MAJOR REVISION PROPOSAL**

|  |  |
| --- | --- |
| Submission Reference Number |  |
| Received by |  |
| Date Received |  |

 *To be filled out by OCI*

**I. COLLEGE AND PROGRAM INFORMATION**

|  |  |
| --- | --- |
| **College** |  |
| **Department** |  |
| **Name of Program** |  |
| **Major** |  *(Please delete this row if it is not applicable.)* |
| **CMO Reference** |  |
| **Date of Last Revision** |  |

**REVISION INFORMATION**

1. **Description and rationale of the revised curriculum**
2. **Program outcomes and performance indicators**

|  |  |  |
| --- | --- | --- |
| Program Outcomes | Course Outcomes*(For Additional Course/s only)* | Performance Indicators |
| a.  |  |  |
| b.  |  |  |
| c.  |  |  |
| d.  |  |  |
| e.  |  |  |

1. **Additional Course/s and Description/s *(as needed)***
2. **Comparative summary between the old and revised curriculum (in matrix format)**
3. **Spreadsheet of faculty to teach additional course/s *(as needed)***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name | Educational Qualification *(Where & When Obtained)* | Field of Specialization | Professional License Number & Expiration date *(if applicable)* | Course/s to teach | Employment Status | Relevant Training Attended |
|  |  |  |  |  |  |  |

**Prepared by:**

[**NAME IN BOLD UPPERCASE**]

[Designation]

Noted:

[**NAME IN BOLD UPPERCASE**]

College Dean

*NOTE: Please attach the prospectus for the contents note. Below is a sample.*

**<LETTERHEAD>**

**<PROGRAM>**

MAJOR IN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(If Applicable)*

<Year> REVISED CURRICULUM

|  |  |
| --- | --- |
| Vision |  |
| Mission |  |
| Core Values |  |
| Strategic Objectives |  |
| College Goals |  |
| Program Outcomes |  |

|  |
| --- |
| FIRST YEAR – 1ST SEMESTER |
| Course Code | Descriptive Title | Min. No. of Hours | Total Units | Prerequisite | Co-Requisite *(If applicable; otherwise, delete this column.)* |
|  |  | Lec | Lab |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | TOTAL |  |  |  |  |  |
| FIRST YEAR – 2nd SEMESTER |
| Course Code | Descriptive Title | Min. No. of Hours | Total Units | Prerequisite | Co-Requisite *(If applicable; otherwise, delete this column.)* |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

*(NOTE:* *Add more rows as needed [Up to FOURTH YEAR, 2ND SEMESTER]. Once addressed or completed, delete all NOTES and prompts.)*

Minimum No. of Units as per CMO No. \_\_\_\_\_\_, s. \_\_\_\_\_\_\_\_\_ = **\_\_\_\_\_\_ Units**

No. of Units as per Enrichment = **\_\_\_\_\_\_\_\_\_ Units**

Total Number of Units = **\_\_\_\_\_\_\_ Units**

Approved as per BOR Resolution No. \_\_\_\_\_, s. \_\_\_\_\_\_\_