

*Request to Cross-list/Co-schedule Graduate Courses*

Department approval is required from each department for cross-listing and co-scheduling courses.

- If a **new course** needs to be created, please attach a Graduate Course Approval Form with this request and submit it to the Graduate School with all required signatures.
- All cross-list and co-schedule requests **not** connected to new courses can be emailed to [Graduate\\_Course\\_Catalog@notes.cc.sunysb.edu](mailto:Graduate_Course_Catalog@notes.cc.sunysb.edu) with each department chair and contact copied.
- If a combination needs to be terminated, please check appropriate box. Please specify if a course needs to be inactivated as a result of the termination.

**Spring Deadlines**

10/1 –Revisions

11/1– Topics & New Courses

**Summer/Fall Deadlines**

3/1– Revisions

4/1– Topics & New Courses

**Effective Date:**       Fall = 8/25/20\_\_     Spring = 01/01/20\_\_     Summer = 05/25/20\_\_

Create a Cross-list     Terminate Cross-list (Complete Section B)     Co-schedule

**Course #1: (Parent course for cross-listing)**

**Department/Course Number:**    **Dept. Alpha**    **Course #**    **Catalogue #**  
 /  /

**Section A:**

Existing Course                       Create New Course (request attached)

**Section B:**

If terminating Cross-List, do you request that Course #1 be inactivated?     Yes     No

**Contact Name:** \_\_\_\_\_                      **Phone:** \_\_\_\_\_

**Department Chair Approval:** \_\_\_\_\_                      **Date:** \_\_\_\_\_

**Divisional Dean Approval:** \_\_\_\_\_                      **Date:** \_\_\_\_\_  
*(Signature Required for New Courses Only)*

**Course #2: (Non-parent course for cross-listing)**

**Department/Course Number:**    **Dept. Alpha**    **Course #**    **Catalogue**  
 /  /

**Section A:**

Existing Course                       Create New Course (request attached)

**Section B:**

If terminating Cross-List, do you request that Course #2 be inactivated?     Yes     No

**Contact Name:** \_\_\_\_\_                      **Phone:** \_\_\_\_\_

**Department Chair Approval:** \_\_\_\_\_                      **Date:** \_\_\_\_\_

**Divisional Dean Approval:** \_\_\_\_\_                      **Date:** \_\_\_\_\_  
*(Signature Required for New Courses Only)*

***Graduate School Use Only:***

Approval: \_\_\_\_\_                      Date: \_\_\_\_\_

Processed By: \_\_\_\_\_                      Date: \_\_\_\_\_

Assigned Course #: \_\_\_\_\_                      E-mailed Department: