# IRC CDC New Course Development Request

All items listed in this document need to be addressed in order for the application to be considered complete. Submit your form to aapirc@jhu.edu.

|  |  |
| --- | --- |
| **Program Director:** |  |
| **Program:** |  |
| **Delivery Semester & Year:** |  |
| **Course Number:** |  |
| **Course Name:** |  |
| **Core Course?: (Yes/No/both)** |  |
| **Elective Course?: (Yes/No/both)** |  |
| **Req. For Online?: (Yes/No)** |  |
| **Existing Course Title ?: (Yes/No)** |  |
| **Contract Type: (Payment/Course Load Release)Note: course load releases must be pre-approved** |  |
| **Instructor's Legal First Name:** |  |
| **Instructor's Legal Last Name:** |  |
| **What is the JHEDID of the instructor?:** |  |
| **Is the instructor new to AAP?:** |  |
| **Is the instructor new to JHU?:** |  |
| **Instructor Address 1:** |  |
| **Instructor City, State:** |  |
| **Instructor Zip:** |  |
| **Instructor Email:** |  |
| **Instructor Phone:** |  |
| **Additional Instructors: Provide name and contact information** |  |

## Justification for request:

(brief statement explaining the request)

## Course Description

When was the course developed or last revised (please provide the most recent year)?

## Program-Level Objectives (that align with the course):

List program level learning objectives here:

## Course-level Learning Objectives

List course level learning objectives here:

## Additional Comments