

**INSTRUCTIONS FOR COLLEAGUE COURSE MASTER FORM
(EXPIRE/END CREDIT COURSE ONLY)**

Please complete one form for each course to be expired / removed from the DCCCD course master.

- Program(s):** Please list the technical program(s) and/or academic discipline area affected by this course.
- Departments:** Please enter the appropriate department code for each college approved to offer this course. *(Please refer to the list of department codes for each college.)*
- Percent:** 100.00 *(This field defaults to 100 percent; no input required.)*
- Subject:** Please enter the course prefix/subject name.
- Course Number:** Please enter the 4-digit course number.
- Expiration date:** Please select one of the following and place an "X" in the appropriate ending date (last term/semester).
- Min/Max Credit Hours:** Please enter the number of credit hours for the course.
- Short Title:** **Short Title:** *(Please use one character per box and enter the appropriate course title according to the Workforce Education Course Manual or Lower Division Academic Course Guide Manual if applicable or listed in one of these manuals*
- Long Title:** Please enter the appropriate course title according to the Workforce Education Course Manual (WECM) or Lower Division Academic Course Guide Manual (LDACGM) if applicable or listed in one of these manuals. **Note: Title for technical courses must match the WECM. Title for academic/liberal arts courses must match the ACGM.**
- National ID:** Please enter the 6-digit cip code for **Career and Technical** courses. *(This is the approval code.)* Please enter the 10-digit cip code for **Academic** courses. *(This is the approval code.)*
- Local ID:** Please enter the 10-digit cip code for the course. *(This is the approval code; may need to add four additional zeros to the end of the approval code.)*

DISCIPLINE COMMITTEE REPRESENTATIVE RESPONSE(s):

Please attach a response of approval or disapproval of changes from each college representative; Discipline Committee Minutes of the meeting that contains committee responses, votes, etc. are acceptable.

Discipline Chair Signature and Campus VPI of Discipline Chair Signature

The form must include the appropriate signatures of the Chair of the Discipline Committee and the Campus VPI of the Discipline Chair.

If assistance is needed with completing this form for an **ACADEMIC** course, please contact Lee Bell at (214) 378-1718.

COLLEAGUE COURSE MASTER FORM (EXPIRE/END CREDIT COURSES ONLY)						
<i>(Please complete one form for each course to be expired/removed from the DCCCD course master.)</i>						
Program(s): <i>(Please list the program(s) affected by this course.)</i>						
Depts: <i>(Please enter the department code for each college approved to offer this course.)</i>					Percent:	100.00 <i>(default)</i>
Subject: <i>(Please enter the course prefix/subject name.)</i>						
Course Number: <i>(Please enter the 4 digit course number.)</i>						
Expiration date: <i>(Please enter the last term/semester course will be offered/taught.)</i>						
Spring 2017 – (06/09/17)			Fall 2017 – (01/08/18)			
Summer 2017 – (09/04/17)			Spring 2018 – (06/06/18)			
Short Title: <i>(Please use one character per box and enter the appropriate course title below according to the Workforce Education Course Manual or Lower Division Academic Course Guide Manual if applicable or listed in one of these manuals.) Note: Short Title is limited to 29 characters (including spaces) in colleague. Title may vary at the SECTION level.</i>						
Long Title: <i>(Please enter the appropriate course title below according to the Workforce Education Course Manual or Lower Division Academic Course Guide Manual if applicable or listed in one of these manuals.) Note: Title must match the WECM or ACGM manual.</i>						
National ID: <i>(Please enter the 6 digit cip code for Technical [WECM] courses. (Please enter the 10 digit cip code for General Academic [ACGM] courses.)</i>				Local ID: <i>(Please enter the 10 digit cip code for the course.)</i>		
Discipline Committee Representative Response(s): <i>(Please attach a response of approval or disapproval of changes from each college representative; Discipline Committee Minutes of the meeting that contain committee responses, votes, etc. are acceptable.)</i>						
Discipline Chair Signature				College	Date	
Campus VPI of Discipline Chair Signature				College	Date	

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