Department or Program: ____________ Course Number: _________ Hours of Credit: __________

Course Title: ____________________________________________________________________________

Name and Rank of Potential Instructors: ______________________________________________________

________________________________________________

Frequency of offering: ___________________________ Number of sections per offering: __________

How many sections will qualify for IW? ______ Is the course required of majors? ________________

How many seats per section will be open to non-majors? ______

Estimated enrollment in each qualifying section (maximum of 25): ________

Number, length, and nature of writing assignments: ____________________________________________

________________________________________________________________________________________

What writing skills will students learn/practice/develop in this course? How will students learn these

skills? (Please feel free to attach an additional sheet). __________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

What revision of written assignments will be required? ________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

PLEASE ATTACH A DETAILED SYLLABUS.

______________________________  __________________________
Director of Undergraduate Studies–Signature  Chair’s Name–Signature

______________________________  __________________________
Print or Type Name  Print or Type Name

Please submit this form to June Hacker, Undergraduate Curriculum Coordinator, at jhacker@indiana.edu.