Program Revi	ew Curriculum Course (Outline of Record (COR) Mini Review Check List:
Department:			
Course Numb	er:		
Course Name	·		
Last Date of C	utline/Review:		
□ Yes □ No	es \square No Is the Last Date of Review within the last 5 Years?		
□ Yes □ No	Have you verified that the Lecture/Lab Hours follow the standard credit hour calculation?		
□ Yes □ No	The course has SLOs, Course Objectives, Lecture Content, and Lab Content (if applicable).		
□ Yes □ No	The SLOs and the Course Objectives are not the same.		
□ Yes □ No □	N/A The Lectur	re Content and Lab	Content are not the same (if applicable).
□ Yes □ No □	N/A The Distar	nce Education Adde	endum is filled in (if applicable).
If "No" is answ required imm	•	ove questions, the (COR is out of compliance and a major revision is
Originator:			
Signature:			
Date:			
Department (hair:		_
Signature:			_
Date:			_