**Educational Policies and Curriculum Committee   
| Syllabus Checklist for New & Modified Course Submissions |**   
*All new & revised course submissions are required to submit the syllabus checklist*

*Objective is to assist faculty to ensure syllabus contains the required and necessary elements   
to provide students with clear expectations of the course.*NOTE:\* indicates a required element of the syllabus. If N/A is checked or this element is not included,   
complete the information detailed on page two for all instances that apply.

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| **Syllabus Area** | **Recommended Detail \* Required** | | **Included in Your Syllabus?** | | |
| ***Heading*** | Course Number\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Course Title\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Course Meeting Time/Day of Week\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Classroom Location\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Faculty Information*** | Office Location\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Office Hours\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Phone Number\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Email Address\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Teaching Philosophy | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Teaching Assistant Contact | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Student Expectations in Classroom*** | Behavior/ Ground Rules (cell phones off, laptops off, etc.) | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Recording of Lectures | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Course Summary*** | Course Description\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Learning Objectives\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Materials*** | Required Textbooks/ Articles/Readings | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Required Software | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Required Equipment  (including use of Canvas) | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Recommended Material | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Availability of Software for Purchase and/or Use | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Evaluation*** | Grading Scale\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Grading Criteria/Rubric | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Late Assignment Policy | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Accommodation of Students with Disabilities*** | University Statement\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Academic Integrity Policy*** | Pitt Public Health Statement\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Diversity/ Inclusion Statement*** | Pitt Public Health Statement\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Title IX Statement*** | University Statement\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Schedule*** | Topics by Session\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Reading and Written Assignments by Session\* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Learning Objectives by Session | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Test Dates | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
| ***Additional Resources*** | Health Sciences Library Liaison Contact Information | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
|  | Writing Center Contact  *(if course is writing intensive)* | | Yes \_\_\_ | No \_\_\_ | N/A \_\_\_ |
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| ***Required Information Not Included*  List the Required Detail Not Included Reason for Not Including** | | | | | |
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