

# Revised Course Application

Texas Workforce Commission – Career Schools and Colleges

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**Instructions:** Please complete both pages of this Revised Course Application (CSC-303).

**Revised Programs must be approved by TWC before the revisions can be implemented.**

**Submit a separate Revised Course Application (CSC-303) for each program being changed.**

Only course changes requiring catalog revisions must be submitted for approval.

Changes in program tuition and/or fees do not have to be approved by TWC, but must be submitted.

Some examples of program revisions which must be approved by TWC before implementation include:

Course title	Subject length in contact/credit hours
Main skills to be learned	Subject additions and/or deletions
Admission requirements	Subject structure (hours of lecture, lab, and/or externship)
Contact/credit hours for program	

**Include with this original CSC-303, Revised Course Application, the following:**

**1 copy of the existing program page(s) in the current school catalog**

**1 draft copy of the new catalog page(s) with changes**

**1 copy of the Summary of Changes Form (CSC-042)**

Note: Send only the catalog page(s) that apply at this time (not the entire catalog), send only the four items listed above, and keep a copy of the revision application for your own files.

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***(Type or print only)***

1. School #: \_\_\_\_\_ School Name: \_\_\_\_\_
2. School Physical Address: \_\_\_\_\_
3. School Mailing Address: \_\_\_\_\_
4. School Director: \_\_\_\_\_
5. School e-mail: \_\_\_\_\_
6. Phone#: \_\_\_\_\_ School FAX#: \_\_\_\_\_ School Toll-Free #: \_\_\_\_\_
7. School credit hour type (if applicable): \_\_\_\_\_ quarter credit hours **or** \_\_\_\_\_ semester credit hours  
Conversion ratio used: 1 credit hour = \_\_\_\_\_ # lecture hours; = \_\_\_\_\_ # lab hours; = \_\_\_\_\_ # externship hours
8. Course Title: \_\_\_\_\_
9. Will the revisions improve and/or update the skills and/or knowledge of students?  YES  NO  
(If "Yes" please explain):

10. List the specific proposed revisions/changes in this course and the reasons for these revisions.

Proposed Revision	Reason for Revision

**NOTE: If adding externship to an existing program then use Attachment 3 of New Course Application, form CSC-302 for required information.**

**If the contact hour length of the program changes 25% or more, or if the program provides training for an additional occupation, or a different job title, then you must submit a New Course Application, form CSC-302, instead of this form.**

11. Will additional equipment be needed to implement this revised course?  YES  NO

(If "YES" please list the additional equipment) :

Date additional equipment available for on-site inspection (mm/dd/yyyy): \_\_\_\_\_

12. Is approval by another agency required before revisions may be implemented?  YES  NO

If "YES" please provide an approximate implementation date (mm/dd/yyyy): \_\_\_\_\_  
 (You must provide TWC a copy of the approval(s) from other agencies in order for your List of Approved Courses to be updated accordingly.)

13. ***I certify that the information provided on this revised course application and in the foregoing statements is true and correct to the best of my knowledge.***

\_\_\_\_\_  
 Signature of School Director Date (mm/dd/yyyy)

\_\_\_\_\_  
 Typed or printed name of School Director

**Mail to: Career Schools and Colleges  
 Texas Workforce Commission  
 101 East 15th Street  
 Austin, Texas 78778-0001**

*Completed forms, inquiries, or corrections to the individual information contained in this form shall be sent to the TWC Career Schools and Colleges, 101 East 15th Street, Room 226T, Austin, Texas 78778-0001, (512) 936-3100. Individuals may receive and review information that TWC collects about the individual by emailing to [open.records@twc.state.tx.us](mailto:open.records@twc.state.tx.us) or writing to TWC Open Records, 101 E. 15th St., Rm. 266, Austin, TX 78778-0001.*