

## Request for Undergraduate Course Change

1. Prepare **one** paper copy and obtain signatures from the Department Chair/Division Head, Registrar and College Dean.
2. Submit the form to your College Curriculum Committee.
3. After obtaining the signature of the College Curriculum Chair, send the paper copy to the current University Curriculum Committee Chair
4. Send an identical (sans signatures) ELECTRONIC COPY and all supporting documentation in a single PDF file (PDF Portfolio recommended) to UCC chair.

College: \_\_\_\_\_ Department/Division: \_\_\_\_\_ Current Alpha Designator/Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

### CURRENT COURSE DATA:

Course Title (Current Title within Banner): \_\_\_\_\_

Alpha Designator/Number: \_\_\_\_\_ Credit Hours: \_\_\_\_\_

Term for which changes will be effective (Fill in with appropriate calendar year.):

Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Other \_\_\_\_\_

### CHECKLIST/QUESTIONS:

1. Complete this **three** page form in its entirety and route through the departments/committees below for changes to a course involving: course title, alpha designator (see accompanying note to the section on the next page), course number, course content, credit hours, or catalog description.
2. If this change will affect other departments that require this course, please send a memo to the affected department and include it with this packet, as well as, the response received from the affected department.
3. If the changes made to this course will make the course similar in title or content to another department's courses, please send a memo to the affected department and include it with this packet, as well as, the response received from the affected department.
4. List courses, if any, that will be deleted because of this change (*must submit course deletion form*): \_\_\_\_\_  
\_\_\_\_\_
5. If the faculty requirements and/or equipment need to be changed upon approval of this proposal, attach a written estimate of additional needs.
6. If library resources are deemed inadequate, include in the rationale a plan to overcome this. The plan must include the cost as stated by the Dean of Libraries.

### SIGNATURES: (If disapproved at any level, do not sign. Return to previous signer.)

Department Chair/Division Head: \_\_\_\_\_

Date: \_\_\_\_\_

Registrar: \_\_\_\_\_

Date: \_\_\_\_\_

College Dean: \_\_\_\_\_

Date: \_\_\_\_\_

College Curriculum Chair: \_\_\_\_\_

Date: \_\_\_\_\_

General Education Council Chair \*: \_\_\_\_\_

Date: \_\_\_\_\_

University Curriculum Committee Chair: \_\_\_\_\_

Date: \_\_\_\_\_

Faculty Senate Chair: \_\_\_\_\_

Date: \_\_\_\_\_

VP Academic Affairs/VP Health Science \_\_\_\_\_

Date: \_\_\_\_\_

\* - Signature necessary only if course is to be Core Curriculum Course

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### Additional Information Required for Undergraduate Course Change

College: \_\_\_\_\_ Department/Division: \_\_\_\_\_ Current Alpha Designator/Number: \_\_\_\_\_

**Change in COURSE TITLE:** \_\_\_\_\_ Yes \_\_\_\_\_ No      **NOTE:** If changing to Critical Thinking, you MUST reserve **(CT)** at the end of new title

From: \_\_\_\_\_

To: \_\_\_\_\_ (Limited to 30 characters and spaces.)

**Change in ALPHA DESIGNATOR:** \_\_\_\_\_ Yes \_\_\_\_\_ No

From: \_\_\_\_\_ To: \_\_\_\_\_

**Change in COURSE NUMBER:** \_\_\_\_\_ Yes \_\_\_\_\_ No

From: \_\_\_\_\_ To: \_\_\_\_\_

**Change in GRADING MODE** (Graded or Credit/No Credit): \_\_\_\_\_ Yes \_\_\_\_\_ No

From: \_\_\_\_\_ To: \_\_\_\_\_

**Change in CREDIT HOURS:** \_\_\_\_\_ Yes \_\_\_\_\_ No

(A change in credit hours requires documentation that specifies the work requirements have been adjusted accordingly.)

From: \_\_\_\_\_ To: \_\_\_\_\_

**Addition of GENERAL EDUCATION ATTRIBUTES:** \_\_\_\_\_ Yes \_\_\_\_\_ No

From: \_\_\_\_\_ To (check all that apply):  CT  INTL  MC  Core II (Core II type: \_\_\_\_\_)

**Note:** Applications for Gen Ed attributes must be attached. <http://www.marshall.edu/wpmu/gened/core-ii-courses-info/>

**Change in CATALOG DESCRIPTION:** \_\_\_\_\_ Yes \_\_\_\_\_ No

(Limit of 30 words. If change is substantial, document in the rationale. If change is minor, simply show the change below.)

From:

To:

See <http://www.marshall.edu/senate/ucc/> for information on chair

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**Additional Information Required for Undergraduate Course Change**

College: \_\_\_\_\_ Department/Division: \_\_\_\_\_ Current Alpha Designator/Number: \_\_\_\_\_

**Define the rationale for EACH type of change here. NOTE: *If major change in content, please consider creating a new course.***