

## Request for Graduate Course Change

1. Prepare one paper copy with all signatures and supporting material and forward to the Graduate Council Chair.
2. E-mail one identical PDF copy to the Graduate Council Chair. If attachments included, please merge into a single file.
3. **The Graduate Council cannot process this application until it has received both the PDF copy and the signed hard copy.**

College: COHP

Dept/Division: Kinesiology

Current Alpha Designator/Number: ESS540

Contact Person: Dr. Jennifer Mak

Phone: 304-696-2927

**CURRENT COURSE DATA:**

Course Title: Women in Sport																				
Alpha Designator/Number: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">E</td> <td style="width: 20px;">S</td> <td style="width: 20px;">S</td> <td style="width: 20px;"> </td> <td style="width: 20px;">5</td> <td style="width: 20px;">4</td> <td style="width: 20px;">0</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>	E	S	S		5	4	0													
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Title Abbreviation: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">W</td> <td style="width: 20px;">o</td> <td style="width: 20px;">m</td> <td style="width: 20px;">e</td> <td style="width: 20px;">n</td> <td style="width: 20px;"> </td> <td style="width: 20px;">i</td> <td style="width: 20px;">n</td> <td style="width: 20px;"> </td> <td style="width: 20px;">S</td> <td style="width: 20px;">p</td> <td style="width: 20px;">o</td> <td style="width: 20px;">r</td> <td style="width: 20px;">t</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>	W	o	m	e	n		i	n		S	p	o	r	t						
W	o	m	e	n		i	n		S	p	o	r	t							

1. Complete this **five** page form in its entirety and route through the departments/committees below for changes to a course involving: course title, alpha designator, 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.

Signatures: if disapproved at any level, do not sign. Return to previous signer with recommendation attached.

Dept. Chair/Division Head	Date <u>11-29-18</u>
Registrar	Date <u>11-30-18</u>
College Curriculum Chair	Date <u>1/24/19</u>
Graduate Council Chair _____	Date _____

## Request for Graduate Course Change - Page 2

College: COHP

Department/Division: Kinesiology

Alpha Designator/Number: ESS540

Provide complete information regarding the course change for each topic listed below.

Change in CATALOG TITLE:  YES  NO

From  (limited to 30 characters and spaces)

To

If Yes, Rationale

Change in COURSE ALPHA DESIGNATOR:

From:     To:      YES  NO

If Yes, Rationale

Sharing alpha designator with other programs has created many administration and advising problems. In addition, the BOG reviewers also recommended changing the alpha designator during the 5-year program review.

Change in COURSE NUMBER:  YES  NO

From:     To:

If Yes, Rationale

Change in COURSE GRADING

From  Grade To  Credit/No Credit

Rationale

Change in CATALOG DESCRIPTION:

YES  NO IF YES, fill in below:

From

To

The history of women in sport, gender equity, opportunities for women in intercollegiate and professional sports (such as participant, coach, trainer, Journalist, agent, and promoter), and physiological perspectives

If Yes  
Rationale

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Change in COURSE CREDIT HOURS:  YES  NO If YES, fill in below:

NOTE: If credit hours increase/decrease, please provide documentation that specifies the adjusted work requirements.

From

To

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Change in COURSE CONTENT:  YES  NO

From

To

Rationale

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College: COHP

Department: Kinesiology

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Course Number/Title ESS540 Women in Sport

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1. **REQUIRED COURSE:** If this course is required by another department(s), identify it/them by name and attach the written notification you sent to them announcing to them the proposed change and any response received. Enter NOT APPLICABLE if not applicable.

2. **COURSE DELETION:** List any courses that will be deleted because of this change. A *Course Deletion* form is also required. Enter NOT APPLICABLE if not applicable.

3. **ADDITIONAL RESOURCE REQUIREMENTS:** If your department requires additional faculty, equipment, or specialized materials as a result of this change, attach an estimate of the time and cost etc. required to secure these items. (NOTE: approval of this form does not imply approval for additional resources. Enter NOT APPLICABLE if not applicable.)

## Request for Graduate Course Change - Page 5

Please insert in the text box below your course change summary information for the Graduate Council agenda. Please enter the information exactly in this way (including headings) based on the appropriate change:

### COURSE DESCRIPTION CHANGE

Department:

Course Number and Title:

Rationale:

Course Description (old)

Course Description: (new)

Catalog Description:

### COURSE NUMBER CHANGE

Department:

Current Course Number/Title:

New Course Number:

Rationale:

Catalog Description:

Credit hours:

### COURSE TITLE CHANGE

Department:

Current Course Number/Title:

New Course Title:

Rationale:

Catalog Description:

The Sports Management Program would like to have the alpha designators for the following courses changed from ESS to STHM. Currently, the Sports Management Program shares the same alpha designator (ESS) with other academic units within the School of Kinesiology. Sharing alpha designator has created many administration and advising problems. In addition, the BOG reviewers also recommended changing the alpha designator during the 5-year program review. This request does NOT include any other changes to these courses. We have provided this form as a template for these alpha designator changes as a group as opposed to filling out a separate form for each course change.

ESS 511

ESS 516

ESS 525

ESS 530

ESS 540

ESS 552

ESS 575

ESS 615

ESS 624

ESS 643

ESS 652

ESS 671

ESS 674

ESS 675

ESS 696



Sport Management  
School of Kinesiology

MEMORANDUM

TO: Dr. Sonja G. Cantrell, Registrar *SGC*

FROM: Dr. Jennifer Mak, Professor and Director of Sport Management

DATE: November 19, 2018

**SUBJECT: Changing Alpha Designator on Courses**

The Sports Management Program would like to have the alpha designators for the following courses changed from ESS to STHM. Currently, the Sports Management Program shares the same alpha designator (ESS) with other academic units within the School of Kinesiology. Sharing alpha designator has created many administration and advising problems. In addition, the BOG reviewers also recommended changing the alpha designator during the 5-year program review. This request does NOT include any other changes to these courses.

ESS 218	ESS 425	ESS 511	ESS 615
ESS 250	ESS 430	ESS 516	ESS 624
ESS 270	ESS 440	ESS 525	ESS 643
ESS 290	ESS 450	ESS 530	ESS 652
ESS 380	ESS 452	ESS 540	ESS 671
ESS 381	ESS 458	ESS 552	ESS 674
ESS 390	ESS 475	ESS 575	ESS 675
ESS 401	ESS 490		ESS 696
ESS 410	ESS 496		
ESS 416			

Cc: Gary McIlvain, Chairperson, School of Kinesiology