Chair: Tracy Christofero

GC#7: Course Change

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: ESS696
Contact Person: Dr. Jennifer Mak		Phone: 304-696-2927
CURRENT COURSE D	ATA:	
Course Title: Semina:	Physical Ed Seminar in Physica	Education
Alpha Designator/Nu	mber: E S S 6 9 6	
Title Abbreviation: S	e m i n a r P h y s	i c a l E d
course title, alpha desi 2. If this change will aff this packet, as well as t 3. If the changes made the affected departme 4. List courses, if any, t	gnator, course number, course content, fect other departments that require this the response received from the affected to this course will make the course simil and include it with this packet as well hat will be deleted because of this change.	course, please send a memo to the affected department and include it with department. ar in title or content to another department's courses, please send a memo to as the response received from the affected department.
Signatures: if disappro	ved at any level, do not sign. Return to p	orevious signer with recommendation attached.
Dept. Chair/Division H	ead Law E	Date 16-29-18

College Curriculum Chair

Graduate Council Chair_

Date.

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College: COHP Department/Division: Kinesiology Alpha Designator/Number: ESS696						
Provide complete information regarding the course change for each topic listed below.						
Change in CATALOG TITLE: YES X NO						
From (limited to 30 characters and spaces)						
То						
If Yes, Rationale						
Change in COURSE ALPHA DESIGNATOR:						
From: E S S T H M XYES 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 X 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						
То						
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
То
Change in COURSE CONTENT: YES X NO
From
То
Rationale

Form updated 10/2011

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College: COHP	4)	Department:	Kinesiology
Course Number/Title ESS696 Semi	inar Physical Ed		
			ify it/them by name and attach the written y response received. Enter NOT APPLICABLE if not
2. COURSE DELETION: List any co NOT APPLICABLE if not applicabl		pecause of this chang	e. A Course Deletion form is also required. Enter
	.,		
	e of the time and cost etc. r	required to secure the	al faculty, equipment, or specialized materials as a resulese items. (NOTE: approval of this form does not imply

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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

COURSE NUMBER CHANGE

COURSE TITLE CHANGE

Department:

Department:

Department:

Course Number and Title:

Current Course Number/Title:

Current Course Number/Title:

Rationale:

New Course Number:

New Course Title:

<u>Course</u> <u>Description (old)</u> <u>Course</u> <u>Description: (new)</u> Rationale:

Rationale:

Catalog Description:

Catalog Description: Credit hours: 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

FROM:

TO: Dr. Sonja G. Cantrell, Registrar

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