

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: COLA Dept/Division: PSC Current Alpha Designator/Number: PSC 509

Contact Person: Shawn Schulenberg Phone: 6-2767

CURRENT COURSE DATA:

Course Title: Western Democratic Politics																										
Alpha Designator/Number: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">P</td> <td style="width: 20px;">S</td> <td style="width: 20px;">C</td> <td style="width: 20px;"> </td> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> <td style="width: 20px;">9</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>	P	S	C		5	0	9																			
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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>7/31/2019 2/11/2019</u>
Registrar	Date <u>2/2/19</u>
College Curriculum Chair	Date <u>2/20/19</u>
Graduate Council Chair _____	Date _____

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College: COLA

Department/Division: PSC

Alpha Designator/Number: PSC 509

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

Change in CATALOG TITLE: YES NO

From

W	e	s	t		D	e	m	o	c	r	a	t	i	c		P	o	l	i	t	i	c	s					
---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	--	--	--	--	--

 (limited to 30 characters and spaces)

To

W	e	s	t	e	r	n		D	e	m	o	c	r	a	t	i	c		P	o	l	i	t	i	c	s		
---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	--	--

If Yes, Rationale

This change provides consistency across department course titles. It also clarifies course content for students, avoiding confusing catalog course titles. Additionally, this change captures more fully the content of the course and accounts for changes in the discipline since the course was created.

Change in COURSE ALPHA DESIGNATOR:

From:

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 To

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 YES NO

If Yes, Rationale

Change in COURSE NUMBER: YES NO

From:

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 To:

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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

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

Change in COURSE CONTENT: YES NO

From

To

Rationale

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College: COLA

Department: PSC 509

Course Number/Title 509 West Democratic Politics

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.

N/A

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.

N/A

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.

N/A

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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

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:

COURSE TITLE CHANGE

Department: PSC

Current Course Number/Title: PSC 509 West Democratic Politics

New Course Title: Western Democratic Politics

Rationale: This change provides consistency across department course titles. It also clarifies course content for students, avoiding confusing catalog course titles. Additionally, this change captures more fully the content of the course and accounts for changes in the discipline since the course was created.

Catalog Description: Study of such nations as Canada and those of Western Europe, particularly Great Britain and France