PROPOSAL SUMMARY AND ROUTING FORM

Proposal Title: Change Course Prerequisites & Course Semester Offerings

Initiating Unit or Individual: Early Childhood Education
Contact Person's Name: Diane Fleming  e-mail: flemingd@ferris.edu  phone: 2392
Date or Term of Proposal Implementation: 

☐ Group I - A – New degree/major or major, redirection of a current offering, or elimination of a degree, major or minor
☐ Group I - B – New minors or concentrations
☒ Group II - A – Minor curriculum clean-up and course changes
☐ Group II - B – New Course
☐ Group III - Certificates
☐ Group IV – Off-Campus Programs

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<tr>
<th>Group/Individual</th>
<th>Signature</th>
<th>Date</th>
<th>Vote/Action *</th>
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<td>Academic Affairs</td>
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<td>Support</td>
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</tbody>
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* Support with Concerns or Not Support must include a list of specific concerns. Votes must be shown for faculty groups. Administrators check appropriate action taken.

To be completed by Academic Affairs

President (Date Approved)  Board of Trustees (Date Approved)  President's Council (Date Approved)
1. Proposal Summary
(Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights. Additional rationale may be attached.)

When we created new courses for the BS in ECE, we listed prerequisites that are not being recognized by the Banner program. The course prerequisites state that students must complete all 200 level courses. Banner is not picking that information up and we now need to list a specific course for each of the new classes. This problem was discovered this semester when I realized that we have a new freshman who is in a 300 level course.

Because the BS in ECE is a new program, our classes have not been at capacity and we have changed the semesters that the courses will be offered to keep from having classes cancelled. The BS classes are now on an Even/Odd year rotation.

2. Summary of All Course Action Required*
   
a. Newly Created Courses to FSU:
      Prefix Number Title

b. Courses to be Deleted From FSU Catalog:
      Prefix Number Title

c. Existing Course(s) to be Modified:
      Prefix Number Title
      EDCD 310 Child Guidance
      EDCD 350 Curriculum Perspectives in ECE
      EDCD 380 Advocacy in ECE
      EDCD 410 ECE Management & Leadership
      EDCD 420 Advanced Children’s Activities
      EDCD 450 Current Issues in ECE
      EDCD 487 Orientation to Internship
      EDCD 491 Internship
      EDCD 499 Capstone Assessment & Internship Seminar

d. Addition of existing FSU courses to program
      Prefix Number Title

e. Removal of existing FSU courses from program
      Prefix Number Title
I. ACTION TO BE TAKEN: MODIFY AN EXISTING COURSE  
Notes:  
1. Complete all parts of Sections I and II; complete only those items in Section III that represent changes.  
2. If either prefix or number is being changed, use ‘Delete Course’ and ‘Create New Course’ forms rather than this form.  
   a. List the changes to be made (See Proposed Changes a through p below): n.p  
   b. Term Effective (6 digit code only): 201105 Examples: 200801(Spring), 200805(Summer), 200808(Fall)  
      Note: The first four digits indicate year, the next two digits indicate month in which term begins.  
II. CURRENT: Include information that is in the current course database.  
   a. Course Prefix  
   b. Number  
   c. Enter Contact Hours per week in boxes.  
      LECTure 3  
      LAB  
      INDependent Study – Check (x) ☐  
      Practicum:  
      Seminar:  
   d. Course Title: Child Guidance  
III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in  
   Section I. Leave all other spaces blank.  
   a. Course Prefix  
   b. Number  
   c. Enter Contact Hours per week in boxes.  
      LECTure 0  
      LAB  
      INDependent Study – Check (x) ☐  
      Practicum:  
      Seminar:  
   d. Course Title: (Limit to 30 characters/spaces.)  
   e. College Code:  
   f. Department Code:  
      Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.  
   g. Type: ☐ Variable ☐ Fixed  
   h. Maximum Credit Hours  
   i. Minimum Credit Hours  
   j. May Be Repeated for Added Credit: Check (x) ☐ Yes ☐ No  
   k. Levels: Check (x) ☐ Undergraduate ☐ Graduate ☐ Professional  
   l. Grade Method: Check (x) ☐ Normal Grading ☐ Credit/No Credit only (Pass/Fail)  
   m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.  
   n. Term(s) Offered: Fall semester, every years only  
      (See instructions for listing.)  
   o. Max. Section Enrollment:  
   p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces. Completion of EDCD 211  

UCC Chair Signature/Date: _______________________________ / /  
Academic Affairs Approval Signature/Date: _______________________________ / /  

To be completed by Academic Affairs Office: - Standard & Measures Coding and General Education Code  
☐ Basic Skill (BS) ☐ General Education (GE) ☐ Occupational Education (OC) G.E. Codes

Office of the Registrar use ONLY  
Date Rec'd: Date Completed: Entered: SCACRSE _ SCADETL _ SCARRES _ SCAPREQ _
I. ACTION TO BE TAKEN: MODIFY AN EXISTING COURSE

Notes:
1. Complete all parts of Sections I and II; complete only those items in Section III that represent changes.
2. If either prefix or number is being changed, use 'Delete Course' and 'Create New Course' forms rather than this form.

a. List the changes to be made (See Proposed Changes a through p below): n.p

b. Term Effective (6 digit code only): 201105 Examples: 200801(Spring), 200805(Summer), 200808(Fall)
Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. CURRENT: Include information that is in the current course database.

a. Course Prefix: EDCD
b. Number: 350

c. Enter Contact Hours per week in boxes.
   LECture [ ] LAB [ ] INDependent Study – Check (x) [ ]
   Practicum: [ ] Seminar: [ ]

d. Course Title: Curriculum Perspectives in ECE

III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in Section I. Leave all other spaces blank.

a. Course Prefix: [ ]
b. Number: [ ]
c. Enter Contact Hours per week in boxes.
   LECture [ ] LAB [ ] INDependent Study – Check (x) [ ]
   Practicum: [ ] Seminar: [ ]

d. Course Title: [ ] (Limit to 30 characters/space.)

e. College Code: [ ]
f. Department Code: [ ]

g. Type: [ ] Variable [ ] Fixed
h. Maximum Credit Hours: [ ]
i. Minimum Credit Hours: [ ]
j. May Be Repeated for Added Credit: Check (x) [ ] Yes [ ] No

k. Levels: Check (x) [ ] Undergraduate [ ] Graduate [ ] Professional

l. Grade Method: Check (x) [ ] Normal Grading [ ] Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

n. Term(s) Offered: Fall semester, odd years only (See instructions for listing.)

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces. Completion of EDCD 211

UCC Chair Signature/Date: ____________________________ 1/1/________

Academic Affairs Approval Signature/Date: ____________________________ 1/1/________

To be completed by Academic Affairs Office: - Standard & Measures Coding and General Education Code

[ ] Basic Skill (BS) [ ] General Education (GE) [ ] Occupational Education (OC) [ ] G.E. Codes

Office of the Registrar use ONLY

Date Rec’d: _____ Date Completed: _____ Entered: SCACRSE __ SCADTL __SCARRES __ SCAPREQ __
MODIFY COURSE
Course Data Entry Form

FORM F

I. ACTION TO BE TAKEN: MODIFY AN EXISTING COURSE

Notes:
1. Complete all parts of Sections I and II; complete only those items in Section III that represent changes.
2. If either prefix or number is being changed, use 'Delete Course' and 'Create New Course' forms rather than this form.

a. List the changes to be made (See Proposed Changes a through p below):

b. Term Effective (6 digit code only): 201105 Examples: 200801(Spring), 200805(Summer), 200808(Fall)
Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. CURRENT: Include information that is in the current course database.

a. Course Prefix: ED
b. Number: 380
c. Enter Contact Hours per week in boxes.
   LECture 3  LAB  INDependent Study – Check (x)
   Practicum:  Seminar:

d. Course Title: Advocacy in ECE

III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in Section I. Leave all other spaces blank.

a. Course Prefix: 
b. Number: 
c. Enter Contact Hours per week in boxes.
   LECTure  LAB  INDependent Study – Check (x)
   Practicum:  Seminar:

d. Course Title: (Limit to 30 characters/spaces.)

e. College Code:  f. Department Code:

Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.

g. Type: [ ] Variable  [ ] Fixed  h. Maximum Credit Hours:  i. Minimum Credit Hours: 

j. May Be Repeated for Added Credit: Check (x)  Yes  No

k. Levels: Check (x)  Undergraduate  Graduate  Professional

l. Grade Method: Check (x)  Normal Grading  Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

n. Term(s) Offered: Spring semester, even years only (See instructions for listing.)  o. Max. Section Enrollment:

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces. Completion of EDCD 211

UCC Chair Signature/Date: Academic Affairs Approval Signature/Date:

To be completed by Academic Affairs Office: - Standard & Measures Coding and General Education Code
[ ] Basic Skill (BS)  [ ] General Education (GE)  [ ] Occupational Education (OC)  [ ] G.E. Codes

Office of the Registrar use ONLY

Date Rec'd:  Date Completed:  Entered: SCACRSE  SCADTL  SCARRES  SCAPREQ
I. ACTION TO BE TAKEN: MODIFY AN EXISTING COURSE

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a. List the changes to be made (See Proposed Changes a through p below): n.p

b. Term Effective (6 digit code only): 201105  Examples: 200801(Spring), 200805(Summer), 200808(Fall)
   Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. CURRENT: Include information that is in the current course database.

   a. Course Prefix  
   b. Number  
   c. Enter Contact Hours per week in boxes.
   EDCD        410
   LECTure 3  LAB  INDependent Study – Check (x)
   Practicum:  
   Seminar:  

d. Course Title: ECE Management & Leadership

III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in Section I. Leave all other spaces blank.

   a. Course Prefix  
   b. Number  
   c. Enter Contact Hours per week in boxes.
   LECTure  
   LAB  INDependent Study – Check (x)
   Practicum:  
   Seminar:  

d. Course Title:  (Limit to 30 characters/spaces.)

e. College Code:  
f. Department Code:  

Credit Hours:  Check (x) type and enter maximum and minimum hours in boxes.

   g. Type:  Variable  Fixed  
   h. Maximum Credit Hours  
   i. Minimum Credit Hours  

j. May Be Repeated for Added Credit:  Check (x) Yes  No

k. Levels:  Check (x) Undergraduate  Graduate  Professional

l. Grade Method:  Check (x) Normal Grading
   Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

n. Term(s) Offered:  spring semester, odd years only  (See instructions for listing.)
   o. Max. Section
   Enrollment:  

p. Prerequisites/Co-requisites/Restrictions:  Limited to 100 spaces.  Completion of EDCD 211

UCC Chair Signature/Date:  / / 

Academic Affairs Approval Signature/Date:  / / 

To be completed by Academic Affairs Office: - Standard & Measures Coding and General Education Code

[ ] Basic Skill (BS)  [ ] General Education (GE)  [ ] Occupational Education (OC)  [ ] G.E. Codes

Office of the Registrar use ONLY

Date Rec'd:  Date Completed:  Entered:  SCACRSE  SCADETL  SCARRES  SCAPREQ  
I. ACTION TO BE TAKEN: MODIFY AN EXISTING COURSE

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2. If either prefix or number is being changed, use 'Delete Course' and 'Create New Course' forms rather than this form.

a. List the changes to be made (See Proposed Changes a through p below): □

b. Term Effective (6 digit code only): □ Examples: 200801(Spring), 200805(Summer), 200808(Fall)
   Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. CURRENT: Include information that is in the current course database.

a. Course Prefix : EDCD
b. Number : 420
   LECTure □ LAB □ INDependent Study – Check (x) □
   Practicum: □ Seminar: □

d. Course Title: □ (Limit to 30 characters/spaces.)

e. College Code: □ f. Department Code: □

Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.

g. Type: □ Variable □ Fixed h. Maximum Credit Hours □ i. Minimum Credit Hours □

j. May Be Repeated for Added Credit: Check (x) □ Yes □ No

k. Levels: Check (x) □ Undergraduate □ Graduate □ Professional

l. Grade Method: Check (x) □ Normal Grading □ Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

n. Term(s) Offered: Fall semester, even years only (See instructions for listing.)

o. Max. Section Enrollment:

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces.

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UCC Chair Signature/Date: ___________________________ / /________

Academic Affairs Approval Signature/Date: ___________________________ / /________

To be completed by Academic Affairs Office: - Standard & Measures Coding and General Education Code

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Office of the Registrar use ONLY

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MODIFY COURSE
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a. List the changes to be made (See Proposed Changes a through p below): [ ]

b. Term Effective (6 digit code only): 201105
Examples: 200801(Spring), 200805(Summer), 200808(Fall)
Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. CURRENT: Include information that is in the current course database.

a. Course Prefix: [EDCD]
b. Number: [450]
c. Enter Contact Hours per week in boxes.
   LEcTure [3]  LAB [ ]  INDependent Study – Check (x) [ ]
   Practicum: [ ]  Seminar: [ ]

d. Course Title: [Current Issues in ECE]

III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in Section I. Leave all other spaces blank.

a. Course Prefix: [ ]
b. Number: [ ]
c. Enter Contact Hours per week in boxes.
   LEcTure [ ]  LAB [ ]  INDependent Study – Check (x) [ ]
   Practicum: [ ]  Seminar: [ ]

d. Course Title: [ ] (Limit to 30 characters/spaces.)

e. College Code: [ ]
f. Department Code: [ ]

Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.

g. Type: [ ] Variable  [ ] Fixed  h. Maximum Credit Hours [ ]
   i. Minimum Credit Hours [ ]

j. May Be Repeated for Added Credit: Check (x) [ ] Yes  [ ] No

k. Levels: Check (x) [ ] Undergraduate  [ ] Graduate  [ ] Professional

l. Grade Method: Check (x) [ ] Normal Grading  [ ] Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

n. Term(s) Offered: [ ] (See instructions for listing.)

o. Max. Section Enrollment: [ ]

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces. Completion of EDCD 211

UCC Chair Signature/Date: ______________________  1/1/____

Academic Affairs Approval Signature/Date: ______________________  1/1/____

To be completed by Academic Affairs Office: - Standard & Measures Coding and General Education Code
[ ] Basic Skill (BS)  [ ] General Education (GE)  [ ] Occupational Education (OC)  __________G.E. Codes

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   Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. CURRENT: Include information that is in the current course database.

a. Course Prefix
b. Number
   EDCE
   487

c. Enter Contact Hours per week in boxes.
   LECture [1]   LAB   INDependent Study – Check (x) [ ]
   Practicum: [ ]   Seminar: [ ]

d. Course Title: Orientation to Internship

III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in Section I. Leave all other spaces blank.

a. Course Prefix
b. Number
   [ ]

c. Enter Contact Hours per week in boxes.
   LECture   LAB   INDependent Study – Check (x) [ ]
   Practicum:   Seminar: [ ]

d. Course Title: (Limit to 30 characters/spaces.)

e. College Code:
f. Department Code:

Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.

g. Type: [ ] Variable   [ ] Fixed
   h. Maximum Credit Hours
   i. Minimum Credit Hours

j. May Be Repeated for Added Credit: Check (x) [ ] Yes   [ ] No

k. Levels: Check (x) [ ] Undergraduate   [ ] Graduate   [ ] Professional

l. Grade Method: Check (x) [ ] Normal Grading   [ ] Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.
   [ ]

n. Term(s) Offered: (See instructions for listing.)
   o. Max. Section Enrollment:

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces. Completion of EDCD 420

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<th>UCC Chair Signature/Date:</th>
<th>Academic Affairs Approval Signature/Date:</th>
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   [ ] Basic Skill (BS)   [ ] General Education (GE)   [ ] Occupational Education (OC)   [ ] G.E. Codes

Office of the Registrar use ONLY

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II. CURRENT: Include information that is in the current course database.

a. Course Prefix: EDCD
b. Number: 491
c. Enter Contact Hours per week in boxes.
Lecture: _______ Lab: _______ INDependent Study – Check (x) _______
Practicum: _______ Seminar: _______

d. Course Title: Internship

III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in Section I. Leave all other spaces blank.

a. Course Prefix: _______ b. Number: _______
c. Enter Contact Hours per week in boxes.
Lecture: _______ Lab: _______ INDependent Study – Check (x) _______
Practicum: _______ Seminar: _______

d. Course Title: _______ (Limit to 30 characters/spaces.)

e. College Code: _______
f. Department Code: _______

Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.

g. Type: □ Variable □ Fixed h. Maximum Credit Hours: _______ i. Minimum Credit Hours: _______

j. May Be Repeated for Added Credit: Check (x) Yes □ No

k. Levels: Check (x) □ Undergraduate □ Graduate □ Professional

l. Grade Method: Check (x) □ Normal Grading □ Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

n. Term(s) Offered: Fall, Spring & Summer (See instructions for listing.) o. Max. Section Enrollment: _______

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces. Completion of EDCD 487

UCC Chair Signature/Date: ______________________  1/1/______  Academic Affairs Approval Signature/Date: ______________________  1/1/______

To be completed by Academic Affairs Office: - Standard & Measures Coding and General Education Code
□ Basic Skill (BS) □ General Education (GE) □ Occupational Education (OC) □ G.E. Codes

Office of the Registrar use ONLY

Date Rec’d: _____ Date Completed: _____ Entered: SCACRSE ___ SCADETL ___SCARRES ___ SCAPREQ ___
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b. Term Effective (6 digit code only): 201105  Examples: 200801(Spring), 200805(Summer), 200808(Fall)
   Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. CURRENT: Include information that is in the current course database.

a. Course Prefix  b. Number   c. Enter Contact Hours per week in boxes.
   EDCD            499       LECTure 2        LAB       INDependent Study – Check (x) ☐
   Practicum:      Seminar: ☐

d. Course Title: Capstone Assessment & Internship Seminar

III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in Section I. Leave all other spaces blank.

a. Course Prefix  b. Number   c. Enter Contact Hours per week in boxes.

d. Course Title: (Limit to 30 characters/spaces.)

e. College Code: f. Department Code:

Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.

g. Type: ☐ Variable ☐ Fixed  h. Maximum Credit Hours  i. Minimum Credit Hours

j. May Be Repeated for Added Credit: Check (x) ☐ Yes ☐ No

k. Levels: Check (x) ☐ Undergraduate ☐ Graduate ☐ Professional

l. Grade Method: Check (x) ☐ Normal Grading ☐ Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

n. Term(s) Offered: Fall, Spring & Summer (See instructions for listing.)  o. Max. Section Enrollment:

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces. Completion of EDCD 487

UCC Chair Signature/Date: ____________________________ 1/1/___    Academic Affairs Approval Signature/Date: ____________________________ 1/1/___

To be completed by Academic Affairs Office:  - Standard & Measures Coding and General Education Code
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