PROPOSAL SUMMARY AND ROUTING FORM

Proposal Title: **Cap Adjustment – BIOL 370**

Initiating Unit or Individual: Dr. Joseph Lipar  
Contact Person’s Name: Dr. Joseph Lipar  
e-mail: liparj1@ferris.edu  
phone: 591-2660

Date or Term of Proposal Implementation: 2012/2013

- 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>Program or Academic Unit Faculty</td>
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<td>Department Faculty</td>
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<td>Department Head</td>
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<td>College Curriculum Committee</td>
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<td>University Curriculum Committee</td>
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<td>Academic Affairs</td>
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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)  

VPAA  
DEC 1 2011  
PROVOST
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.)

   We recently discovered that, according to what is recorded in Banner, the official cap for individual sections of BIOL 370 (Developmental Biology) currently stands at 20. The practice for this course has been to cap each lab section at 24, as in all of our upper-level biology courses that include labs. Indeed, we believe an error was made when the official cap was entered into Banner, and we would like to correct that error by officially raising the section cap for BIOL 370 to 24.

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
      BIOL 370     Developmental Biology
   d. Addition of existing FSU courses to program
      Prefix       Number       Title
   e. Removal of existing FSU courses from program
      Prefix       Number       Title

3. Summary of All Consultations
   Form Sent (B or C)  Date Sent  Responding Dept.  Date Received & by Whom
   C
   FLITE

4. Will External Accreditation be Sought? (For new programs or certificates only)
   ________ Yes   ________ No

   If yes, name the organization involved with accreditation for this program.

5. Program Checksheets affected by this proposal.
FLITE SERVICES CONSULTATION FORM

To be completed by the liaison librarian and approved by the Dean of FLITE. All returned forms should be included in the proposal. FLITE must respond within 20 calendar days of receipt of this form to insure that the form is included in the final proposal.

FAILURE TO RESPOND IS CONSIDERED AS SUPPORT OF THE CHANGE.

RE: Proposal Title: **Cap Adjustment – BIOL 370**

Projected number of students per year affected by proposed change: **48**

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<tr>
<th>Initiator(s):</th>
<th>Dr. Joseph Lipar</th>
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<tbody>
<tr>
<td>Proposal Contact:</td>
<td>Dr Joseph Lipar</td>
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<tr>
<td>Date Sent:</td>
<td></td>
</tr>
<tr>
<td>Department: Biology</td>
<td>Campus Address: ASC 2004</td>
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| Liaison Librarian Signature: | Frances Rosen |
| Date: | 11/8/11 |
| Dean of FLITE Signature: | Leah M. Meyer |
| Date Returned: | 11-15-11 |

Based upon our review on **11/8/11** (date), FLITE concludes that:

- [X] Library resources to support the proposed curriculum change are currently available.

- [ ] Additional Library resources are needed but can be obtained from current funds.

- [ ] Support, but significant additional Library funds/resources are required in the amount of $__________.

- [ ] Does not support the proposal for reasons listed below.

Comment regarding the impact this proposal will have on library resources, collection development, programs, etc. Use additional pages if necessary.
MODIFY COURSE
Course Data Entry Form

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): [201201] 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

BIO 370

C. Enter Contact Hours per week in boxes.

LECTure [ ] LAB [ ] I N D e p e n d e n t Study – Check (x) [ ]

Practicum: [ ] Seminar: [ ]

d. Course Title: [Developmental Biology]

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 [ ] I N D e p e n d e n t 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: [24]

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

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