PROPOSAL SUMMARY AND ROUTING FORM

Proposal Title: Recreation Leadership and Management (Curriculum Update)

Initiating Unit or Individual: Dept. Recreation, Leisure Services and Wellness
Contact Person's Name: Dr. Susan Hastings-Bishop  e-mail: hastings@ferris.edu phone: X2457
Date or Term of Proposal Implementation: Summer 2012

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
X Group II - A – Minor curriculum clean-up and course changes
Group II - B – New Course
Group III - Certificates
Group IV – Off-Campus Programs

<table>
<thead>
<tr>
<th>Group/Individual</th>
<th>Signature</th>
<th>Date</th>
<th>Vote/Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Faculty</td>
<td></td>
<td>Sept. 2011</td>
<td>2 Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9/28/11</td>
<td>Support with Concerns</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Support</td>
</tr>
<tr>
<td>Department Faculty</td>
<td></td>
<td>Sept. 2011</td>
<td>2 Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9/28/11</td>
<td>Support with Concerns</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Support</td>
</tr>
<tr>
<td>Department Head</td>
<td></td>
<td>Sept. 2011</td>
<td>X Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9/28/11</td>
<td>Support with Concerns</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Support</td>
</tr>
<tr>
<td>College Curriculum Committee</td>
<td></td>
<td>9/28/11</td>
<td>Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Support with Concerns</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Support</td>
</tr>
<tr>
<td>Dean</td>
<td></td>
<td>11/29/11</td>
<td>5 Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Support with Concerns</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Support</td>
</tr>
<tr>
<td>University Curriculum Committee</td>
<td></td>
<td>11/22/11</td>
<td>Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Support with Concerns</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Support</td>
</tr>
<tr>
<td>Senate</td>
<td></td>
<td>11/23/11</td>
<td>Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Support with Concerns</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Support</td>
</tr>
<tr>
<td>Academic Affairs</td>
<td></td>
<td>11/23/11</td>
<td>Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Support with Concerns</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Support</td>
</tr>
</tbody>
</table>

* 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.)

At the request from College of Education and Human Service and the Academic Provost office the attached course Form F's for RMLS 101 172 and 491 have had the cap's changed to reflect workload policy and facility capacity.

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
RMLS 101  Intercollegiate Athletics
RMLS 172  Rock Climbing
RMLS 491  Recreation Leadership and Management Internship

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 /SEE FORM B Summary file and sent emails/returned forms.

<table>
<thead>
<tr>
<th>Form Sent (B or C)</th>
<th>Date Sent</th>
<th>Responding Dept.</th>
<th>Date Received &amp; by Whom</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Will External Accreditation be Sought? (For new programs or certificates only)

5. Program Check sheets affected by this proposal.
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): Changing the official max cap to 25 students for all sections of RMLS 101 Intercollegiate Athletics

b. Term Effective (6 digit code only): 201205

Examples: 200801(Spring), 200805(Summer), 200808(Fall)

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

c. Enter Contact Hours per week in boxes.

RMLS 101

LECTure LAB 1 INDependent Study – Check (x) □
Practicum: Seminar: □

d. Course Title: Intercollegiate Athletics

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

a. Course Prefix
b. Number

RMLS 101

c. Enter Contact Hours per week in boxes.

LECTure LAB 1 INDependent Study – Check (x) □
Practicum: Seminar: □

d. Course Title: Intercollegiate Athletics (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

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: 25

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 _ 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): Change cap of RMLS 172 to  
      [6 based on only 8 climbing set ups in the climbing wall facility (one climber and one belayer per set up)]

   b. Term Effective (6 digit code only): 201205  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  
      LAB  
      INDependent Study – Check (x)  
      Practicum:  
      Seminar:  

   d. Course Title: Rock Climbing

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:  

   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.

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  

Rev. 07/23/07
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): Changing the official max cap to 27 students (Note workload policy states pay rate will be pro-rated per student at .44)

   b. Term Effective (6 digit code only): 201205  Examples: 200801(Spring), 200805(Summer), 200808(Fall)
      Note: The first four digits indicate year, the next two digits indicate month in which term begins.

   d. Course Title: Recreation Leadership and Management Internship

II. CURRENT: Include information that is in the current course database.
   a. Course Prefix
   b. Number
   c. Enter Contact Hours per week in boxes.
      RMLS  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)      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: 27

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