PROPOSAL SUMMARY AND ROUTING FORM

Proposal Title: Course purge of College of Business courses no longer in use

Initiating Individual: Maureen Milzarski Initiating Department or Unit: College of Business

Contact Person’s Name: David Nicol Email: DavidNicol@ferris.edu Phone: 591-2422

☐ Group I-A – New Degree, major, concentration, minor, or redirection of a current offering
☐ Group I-B – Deletion of a degree, major, concentration, or minor
☐ Group II-A – New Course, modification of a course, deletion of a course
☒ Group II-B – Minor Curriculum Clean-up
☐ Group III – Certificate (☐ College Credit ☐ Non-credit ☐ New Certificate)
☐ Group IV – Other site location (☐ College Credit ☐ Non-credit )

<table>
<thead>
<tr>
<th>PLEASE PRINT AND SIGN YOUR NAME</th>
<th>DATE</th>
<th>VOTE/ACTION * Number Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Representative **</td>
<td></td>
<td>Support</td>
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<td></td>
<td></td>
<td>Support with Concerns</td>
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<td></td>
<td>Not Support</td>
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<td>Abstain</td>
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<td>Department/School/Faculty</td>
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<td>Representative Vote **</td>
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<td>Abstain</td>
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<tr>
<td>College Curriculum Committee/Faculty</td>
<td>4/21/10</td>
<td>Support</td>
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<td>Support with Concerns</td>
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<td>Abstain</td>
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<tr>
<td>University Curriculum Committee **</td>
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<td>Support</td>
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<td></td>
<td></td>
<td>Support with Concerns</td>
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<td>Not Support</td>
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<td>Abstain</td>
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<td>Senate **</td>
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<td>Support</td>
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<td>Support with Concerns</td>
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<td>Not Support</td>
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<tr>
<td>Academic Affairs</td>
<td></td>
<td>Support</td>
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<td></td>
<td></td>
<td>Hold</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not Support</td>
</tr>
</tbody>
</table>

* Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

** Number Count must be given for all members present and/or voting.

To be completed by Academic Affairs

Date of Implementation: Click here to enter text.

President (Date Approved)

Board of Trustees (Date Approved)

Academic Officers of MI (Date Approved)
1. Proposal Summary: (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights)
   All courses to be deleted from Banner are no longer in use for the College of Business. Courses should not affect program check sheets within or outside the College of Business.

2. Summary of Curricular Action (Check all that apply to this proposal)
   - [ ] Degree
   - [ ] Major
   - [ ] Minor
   - [ ] Concentration
   - [ ] Certificate
   - [ ] Course
   - [ ] New
   - [ ] Modification
   - [ ] Deletion

   Name of Degree, Major, etc.: Click here to enter text.

3. Summary of All Course Action Required: Click here to enter text.

   A. Newly Created Courses to be Added to the Catalog

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Title</th>
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</thead>
<tbody>
<tr>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
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</tr>
</tbody>
</table>

   B. Courses to be Deleted from FSU Catalog

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>MTED 520</td>
<td>Information Systems Mgmt</td>
<td></td>
</tr>
<tr>
<td>MTED 540</td>
<td>Multimedia Instruction-Design</td>
<td></td>
</tr>
<tr>
<td>MTED 550</td>
<td>Tech Assessment-Procurement</td>
<td></td>
</tr>
<tr>
<td>MTED 560</td>
<td>Productivity Systems</td>
<td></td>
</tr>
<tr>
<td>BLAW 411</td>
<td>Legal Env-Sport-Resort Mgmt</td>
<td></td>
</tr>
<tr>
<td>BUSN 352</td>
<td>Human Factors Office Automate</td>
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<tr>
<td>HOMT 397</td>
<td>Special Studies in HOMT</td>
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<tr>
<td>INSR 290</td>
<td>Special Topics in INSR</td>
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<tr>
<td>INSR 490</td>
<td>Special Topics in INSR</td>
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<tr>
<td>MGMT 371</td>
<td>Production-Operations MGMT</td>
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<td>MGMT 439</td>
<td>Inventory—Supply Management</td>
<td></td>
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<tr>
<td>MGMT 484</td>
<td>Contemporary Management Trends</td>
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<tr>
<td>MGMT 499</td>
<td>Strategy-Business Policy</td>
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<tr>
<td>REAL 297</td>
<td>Special Studies in REAL</td>
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<tr>
<td>ADVG 297</td>
<td>Special Studies in ADVG</td>
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<td>ADVG 397</td>
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<td>ADVG 497</td>
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<td>ECOM 200</td>
<td>World of E-Commerce</td>
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<td>Special Topics in VISD</td>
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<td>ACCT 205</td>
<td>Managerial Accounting</td>
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<tr>
<td>ACCT 231</td>
<td>Payroll Accounting</td>
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<td>ACCT 388</td>
<td>Career Planning—Accountants</td>
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<td>ACCT 510</td>
<td>Accounting Theory</td>
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<td>ACCT 513</td>
<td>International Accounting</td>
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<td>ACCT 525</td>
<td>Quantitative Methods-ACCT</td>
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<tr>
<td>ACCT 538</td>
<td>Acct Systems and Controls 2</td>
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<tr>
<td>ACCT 550</td>
<td>Fed Income Tax-Business</td>
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<td>ACCT 551</td>
<td>Federal Income Tax 3</td>
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<tr>
<td>ACCT 558</td>
<td>Tax Research Methodology</td>
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<tr>
<td>ACCT 561</td>
<td>Principles of Fund Accounting</td>
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<td>ACCT 590</td>
<td>Special Topics in ACCT</td>
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<tr>
<td>ACCT 599</td>
<td>Micro Applications in ACCT</td>
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<tr>
<td>ACCT 611</td>
<td>Financial Statement Analysis</td>
<td></td>
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<tr>
<td>ACCT 618</td>
<td>Issues in Financial Accounting</td>
<td></td>
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<tr>
<td>ACCT 628</td>
<td>Issues in Management ACCT</td>
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<tr>
<td>ACCT 655</td>
<td>Estate and Gift Tax</td>
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<tr>
<td>ACCT 656</td>
<td>Tax Factors in Business</td>
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<tr>
<td>ACCT 668</td>
<td>Govt and Not for Profit ACCT</td>
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<tr>
<td>ACCT 670</td>
<td>Thesis Project</td>
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</tbody>
</table>
ACCT 690 Special Topics in Accountancy
ACCT 697 Special Studies in ACCT
ISYS 292 Principles of Information Systems
ISYS 310 Novell Network Administration
MISM 655 E-Business Strategy
MISM 690 Special Topics in ISM
MISM 697 Special Studies in ISM
RFIM 110 Intro to Hospitality Industry
RFIM 190 Special Topics in RFIM
MGMT 410 Small Business Sys-Operations
MISM 691 ISM Internship
MIMBA 505 Numerical and Data Analysis

C. Existing Courses to be Modified
Prefix | Number | Title
--- | --- | ---
Click here to enter text. | Click here to enter text. | Click here to enter text.

D. Addition of existing FSU courses to program
Prefix | Number | Title
--- | --- | ---
Click here to enter text. | Click here to enter text. | Click here to enter text.

E. Removal of existing FSU courses from program
Prefix | Number | Title
--- | --- | ---
Click here to enter text. | Click here to enter text. | Click here to enter text.

4. Summary of All Consultations
Form Sent (B or C) | Date Sent | Responding Department | Date Received & By Whom
--- | --- | --- | ---
Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text.

5. Will External Accreditation be sought? (For new programs or certificates only)
☐ Yes ☐ No
If yes, name the organization involved with accreditation for this program. Click here to enter text.

6. Is a PCAF required? ☐ Yes ☐ No
Is the PCAF approved? ☐ Yes ☐ No (If yes, supply link on Academic Affairs website where PCAF is posted.

7. Program Checksheets affected by this proposal (Check all that apply to this proposal)
☐ Add Course ☐ Delete Course ☐ Modify Course ☐ Change Prerequisite ☐ Move from required to elective
☐ Move from elective to required ☐ Change Outcomes and Assessment Plan ☐ Change Credit hours

8. List all Checksheets affected by this proposal:
College | Department | Program
--- | --- | ---
Click here to enter text. | Click here to enter text. | Click here to enter text.
Signed Form Attached.
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix MTED
b. Number 520

c. Enter Contact Hours per week in boxes.
   Lecture
   Lab
   Seminar

d. Independent Study
   Practicum:
   (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Information Systems Mgmt

UCC Chair Signature/Date: ____________________________ / ___ / ___

Academic Affairs Approval Signature/Date: ____________________________ / ___ / ___

Office of the Registrar use ONLY

Date Rec'd:   Date Completed:   Entered: SCACRSE    SCADETL  SCARRES    SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix MTED b. Number 540 c. Enter Contact Hours per week in boxes.
   LECTure LAB Seminar

d. INDependent Study ☐ Practicum: ☐ |Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Multimedia Instruction-Design

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

Office of the Registrar use ONLY

Date Rec’d: _____ Date Completed: _____ Entered: SCACRSSE SCADET __ SCARRES SCAPREQ ___
Delete a Course
Course Data Entry Form

FORM F
Rev. September 2012

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix MTED  b. Number 550  c. Enter Contact Hours per week in boxes.
   LECTure  LAB  Seminar

d. INDependent Study  ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: Tech Assessment-Procurement

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

________________________________________ / / __________________________________________ / /

Office of the Registrar use ONLY

Date Rec'd: _____ Date Completed: _____ Entered: SCACRSE __ SCADETL __ SCARRES __ SCAPREQ __
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix MTED  b. Number 560  c. Enter Contact Hours per week in boxes.
   LECTure LAB Seminar

d. INDependent Study ☐ Practicum: (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Productivity Systems

UCC Chair Signature/Date: ___________________________ / /

Academic Affairs Approval Signature/Date: ___________________________ / /

Office of the Registrar use ONLY

Date Rec’d: _____ Date Completed: _____ Entered: SCACRSE __ SCADETL __ SCARRES __ SCAPREQ __
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix HOMT
b. Number 397 c. Enter Contact Hours per week in boxes.
   Lecture Lab Seminar

d. INDependent Study ☐ Practicum:          [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: Special Studies in HOMT

UCC Chair Signature/Date: _____________________________ / / 

Academic Affairs Approval Signature/Date: _____________________________ / / 

Office of the Registrar use ONLY

Date Rec’d: __ Date Completed: _____ Entered: SCACRSE ___ SCADETL ___ SCARRES ___ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix INSR
b. Number 290
c. Enter Contact Hours per week in boxes.

LECTure LAB Seminar

d. INDependent Study ☐ Practicum: ☐
   (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Special Topics in INSR

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

Office of the Registrar use ONLY

Date Rec’d: _____ Date Completed: _____ Entered: SCACRSE _ SCADET _ SCARRES _ SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

   a. Course Prefix INSR b. Number 490 c. Enter Contact Hours per week in boxes.
   d. INDependent Study ☐  Practicum: ☐  Seminar [Check (x) box as appropriate. See definitions in Appendix E.]
   e. Full Course Title: Special Topics in INSR

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

Office of the Registrar use ONLY
Date Rec'd: __________ Date Completed: __________ Entered: SCACRSE __ SCADET __ SCARRES __ SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix MGMT  b. Number 484  c. Enter Contact Hours per week in boxes.
   LECTure   LAB   Seminar

d. INDependent Study [ ] Practicum: [ ] (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Contemporary Management Trends

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

Office of the Registrar use ONLY

Date Rec'd: _____ Date Completed: _____ Entered: SCACRSE ___ SCADETL ___ SCARRES ___ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix MGMT  
b. Number 484  
c. Enter Contact Hours per week in boxes.
   Lecture  
   Lab  
   Seminar  
d. Independent Study  
   Practicum:  
   [Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Contemporary Management Trends

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

Office of the Registrar use ONLY

Date Rec'd:  
Date Completed:  
Entered:  SCACRSE  SCADETL  SCARRES  SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix MGMT  b. Number 499  c. Enter Contact Hours per week in boxes,
LECTure LAB Seminar

d. INDependent Study [ ] Practicum: [ ] (Check (x) box as appropriate. See definitions in Appendix E.)
e. Full Course Title: Strategy-Business Policy

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

NNN NNN NNN NNN

Office of the Registrar use ONLY

Date Rec'd: Date Completed: Entered: SCACRSE SCADETL SCARRES SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix: REAL
b. Number: 297

C. Enter Contact Hours per week in boxes.

d. Independent Study ☐ Practicum: ☐

[Check (X) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: Special Studies in REAL

UCC Chair Signature/Date: ___________________________ / /

Academic Affairs Approval Signature/Date: ___________________________ / /

Office of the Registrar use ONLY

Date Rec’d: _____ Date Completed: _____ Entered: SCACRSE SCADET SCARRES SCAREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.  
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term  Spring  Year  2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix  ADVG  b. Number  297  c. Enter Contact Hours per week in boxes.  
   LECture  LAB  Seminar  
   d. INDependent Study  
   Practicum:  
   (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Special Studies in ADVG

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

Office of the Registrar use ONLY

Date Rec'd:  Date Completed:  Entered: SCACRSE  SCADETL  SCARRES  SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix: ADVG  
b. Number: 397  
c. Enter Contact Hours per week in boxes.
   Lecture  
   Lab  
   Seminar  

d. Independent Study [ ]  Practicum:  
   (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Special Studies in ADVG

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

Office of the Registrar use ONLY

Date Rec'd: _____  Date Completed: _____  Entered: SCACRSE  SCADTL  SCARRES  SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ADVG  b. Number 490  c. Enter Contact Hours per week in boxes.
   LECTure LAB Seminar

d. INDependent Study ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.)

  e. Full Course Title: Special Topics in ADVG

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

Office of the Registrar use ONLY

Date Rec’d: ______ Date Completed: ______ Entered: SCACRSE SCADETL SCARRES SCAPREQ
Delete a Course
Course Data Entry Form

FORM F
Rev. September 2012

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ADVG   b. Number 497  c. Enter Contact Hours per week in boxes.
   LECture                LAB   Seminar
   d. INDependent Study   Practicum: (Check (x) box as appropriate. See definitions in Appendix E.)
   e. Full Course Title: Special Studies in ADVG

UCC Chair Signature/Date: ___________________________________________/_

Academic Affairs Approval Signature/Date: _______________________________/_

Office of the Registrar use ONLY

Date Rec'd: ______ Date Completed: ______ Entered: SCACRSE ___ SCADETL ___ SCARRRES ___ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix VISD       b. Number 290 c. Enter Contact Hours per week in boxes.
   LECTure LAB Seminar

d. INDependent Study   Practicum: (Check (x) box as appropriate. See definitions in Appendix E.)

   e. Full Course Title: Special Topics in VISD

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

Office of the Registrar use ONLY

Date Rec'd: _____ Date Completed: _____ Entered: SCACRSE __ SCADETL __ SCARRES __ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT b. Number 388 c. Enter Contact Hours per week in boxes.
   LECTure LAB Seminar
 d. INDependent Study ☐ Practicum: ☐ Check (x) box as appropriate. See definitions in Appendix E.
 e. Full Course Title: Career Planning - Accountants

UCC Chair Signature/Date: __________________________/_______

Academic Affairs Approval Signature/Date: __________________________/_______

Office of the Registrar use ONLY

Date Rec’d: _____ Date Completed: _____ Entered: SCACRESE SCADETL SCARRES SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix: ACCT  b. Number: 510  c. Enter Contact Hours per week in boxes.
   
   d. Independent Study ☐ Practicum: ☐ (Check (x) box as appropriate. See definitions in Appendix E.)

   e. Full Course Title: Accounting Theory

UCC Chair Signature/Date: ________________________ / /

Academic Affairs Approval Signature/Date: ________________________ / /

Office of the Registrar use ONLY

Date Rec’d: _____ Date Completed: _____ Entered: SCACRSE _ SCADETL _ SCARRES _ SCAPREQ
Delete a Course
Course Data Entry Form

FORM F
Rev. September 2012

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT
b. Number 513
c. Enter Contact Hours per week in boxes.
   LECTure
   LAB
   Seminar

d. INDependent Study ◐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: International Accounting

UCC Chair Signature/Date: ___________________________ / /

Academic Affairs Approval Signature/Date: ___________________________ / /

Office of the Registrar use ONLY

Date Rec'd: ______ Date Completed: ______ Entered: SCACRSE _ SCADTL _ SCARRES _ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix: ACCT
b. Number: 525

c. Enter Contact Hours per week in boxes:
   LECTure
   LAB
   Seminar

d. INDependent Study ☐ Practicum: ☐
   (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Quantitative Methods - ACCT

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

                     / /                     / /

Office of the Registrar use ONLY

Date Rec’d: ______ Date Completed: ______ Entered: SCACRSE SCADETL SCARRES SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog. (See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT

b. Number 538

c. Enter Contact Hours per week in boxes.

L E C T U R E  L A B  S E M I N A R

d. INDependent Study [ ] Practicum: [ ] [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: ACCT Systems and Controls 2

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

Office of the Registrar use ONLY

Date Rec'd: _____ Date Completed: _____ Entered: SCACRS SCADERTL SCARRES SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT
b. Number 550  c. Enter Contact Hours per week in boxes.
   LECTure
   LAB
   Seminar
d. INDependent Study ☐ Practicum: ☐  [Check (x) box as appropriate. See definitions in Appendix E.]
e. Full Course Title: Fed Income Tax-Business

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

Office of the Registrar use ONLY
Date Rec'd: _____ Date Completed: _____ Entered: SCACRESE__SCADETL__SCARRES__SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

- Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

- Course Prefix: ACCT
- Course Number: 551
- Contact Hours per week:
- Lecture: [ ]
- Lab: [ ]
- Seminar: [ ]
- Independent Study: [ ]
- Practicum: [ ]

- Full Course Title: Fed Income Tax 3

---

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

Office of the Registrar use ONLY

Date Rec'd: ____ Date Completed: ____ Entered: SCACRSE SCADETL SCARRES SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT
b. Number 558

c. Enter Contact Hours per week in boxes.
   Lecture  LAB  Seminar

d. INDependent Study ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: Tax Research Methodology

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

Office of the Registrar use ONLY
Date Rec'd: Date Completed: Entered: SCACRTSE  SCADETL  SCARRES  SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT  b. Number 561  c. Enter Credit Hours per week in boxes.
                           LECture          LAB            Seminar

d. INDependent Study ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.)
e. Full Course Title: Principles of Fund Accounting

________________________________________________________________________________________

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

Office of the Registrar use ONLY

Date Rec'd: Date Completed: Entered: SCACRSE ☐ SCADETL ☐ SCARRES ☐ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT  b. Number 590  c. Enter Contact Hours per week in boxes.
   LECTure  LAB  Seminar

d. INDependent Study  Practicum: (Check (x) box as appropriate. See definitions in Appendix E.)
e. Full Course Title: Special Topics in ACCT

UCC Chair Signature/Date: ___________ / ___________

Academic Affairs Approval Signature/Date: ___________ / ___________

Office of the Registrar use ONLY

Date Rec'd: _______ Date Completed: _______ Entered: SCACRSE ___ SCADET ___ SCARRES ___ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT b. Number 599 c. Enter Contact Hours per week in boxes.

LECTure LAB Seminar

d. INDependent Study ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Micro Applications in ACCT

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

Office of the Registrar use ONLY

Date Rec'd: Date Completed: Entered: SCACRSE _ SCADETL _ SCARRES _ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT  b. Number 611  c. Enter Contact Hours per week in boxes.
   LECTure  LAB  Seminar
d. INDependent Study ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.)
e. Full Course Title: Financial Statement Analysis

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

Office of the Registrar use ONLY
Date Rec’d: ______ Date Completed: ______ Entered: SCACRSE __ SCADETL __ SCARRES __ SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT  b. Number 618  c. Enter Contact Hours per week in boxes.
   LECTure            LAB Seminar

d. INDependent Study ☐ Practicum: ☐ [Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Issues in Financial Accounting

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

_________________________________________ /   ________________________________ /   
Office of the Registrar use ONLY

Date Rec'd:  Date Completed:  Entered:  SCACRSE  SCEDTL  SCARRES  SCAREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

   a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

   a. Course Prefix: ACCT
   b. Number: 628
   c. Enter Contact Hours per week in boxes.
   d. INDependent Study ☐ Practicum: ☐
   e. Full Course Title: Issues in Management ACCT

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

Office of the Registrar use ONLY
Date Rec'd: ______ Date Completed: ______ Entered: SCACRSE __ SCADTL __ SCARRES __ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT
b. Number 655 c. Enter Contact Hours per week in boxes.
   LECTure LAB Seminar
d. INDependent Study Practicum: (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Estate and Gift Tax

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

Office of the Registrar use ONLY
Date Rec'd: ______ Date Completed: ______ Entered: SCACRSE __ SCADETL __ SCARRES __ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term  Spring       Year  2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT     b. Number  656 c. Enter Contact Hours per week in boxes.
                                LECTure   LAB    Seminar


d. INDependent Study  ☐ Practicum:  [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: Tax Factors in Business


UCC Chair Signature/Date: ___________________________________________ / /

Academic Affairs Approval Signature/Date: ___________________________________________ /

Office of the Registrar use ONLY

Date Rec'd: ______ Date Completed: ______ Entered: SCACRESE SCADTL SCARRES SCAPREQ
+ Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix: ACCT
b. Number: 688

c. Enter Contact Hours per week in boxes.

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<th>Seminar</th>
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<table>
<thead>
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<th>Independent Study</th>
<th>Practicum:</th>
<th>[Check (x) box as appropriate. See definitions in Appendix E.]</th>
</tr>
</thead>
</table>

e. Full Course Title: Govt and Not for Profit ACCT

UCC Chair Signature/Date: ________________ / __________

Academic Affairs Approval Signature/Date: ________________ / __________

Office of the Registrar use ONLY

Date Rec'd: _____ Date Completed: _____ Entered: SCACRSE __ SCADTL __ SCARRES __ SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT  b. Number 670 c. Enter Contact Hours per week in boxes.

Lecture Labs Seminar

d. INDependent Study Practicum: (Check [X] box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Thesis Project

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

Office of the Registrar use ONLY

Date Rec’d: Date Completed: Entered: SCACRSE SCADETL SCARRES SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT  b. Number 690  c. Enter Contact Hours per week in boxes.
   LECTure LAB Seminar

d. INDependent Study ☐ Practicum: ☐ [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: Special Topics in Accountancy

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

Office of the Registrar use ONLY

Date Rec'd: ______ Date Completed: ______ Entered: SCACRSE ___ SCADTL ___ SCARRES ___ SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix: ACCT
b. Number: 697
c. Enter Contact Hours per week in boxes.

d. □ INDependent Study □ Practicum: LECTure LAB Seminar

[Check (x) box as appropriate. See definitions in Appendix E.]
e. Full Course Title: Special Studies in ACCT

UCC Chair Signature/Date: ___________________________ / / 

Academic Affairs Approval Signature/Date: ___________________________ / / 

Office of the Registrar use ONLY

Date Rec'd: _____ Date Completed: _____ Entered: SCACRSE __ SCADETL __ SCARRES __ SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring  Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix  MISM  b. Number  655  c. Enter Contact Hours per week in boxes.
   LECture  LAB  Seminar

d. INDependent Study  ☐  Practicum:  [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: E-Business Strategy

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

________________________________________  / /  ________________________________  / /

Office of the Registrar use ONLY

Date Rec'd: Date Completed: Entered: SCACRSE  SCADETL  SCARRES  SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix: MIS   b. Number: 690  c. Enter Contact Hours per week in boxes.
   LECture  LAB  Seminar

d. INDependent Study  Practicum:  (Check (x) box as appropriate. See definitions in Appendix E.)

 e. Full Course Title: Special Topics in ISM

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

                                                   / /

Office of the Registrar use ONLY

Date Rec'd:   Date Completed:   Entered: SCACRES  SCADET  SCARRES  SCAREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

da. Course Prefix MISM  b. Number 697  c. Enter Contact Hours per week in boxes.

 d. INDependent Study  Practicum:  Seminar

 e. Full Course Title: Special Studies in ISM

______________________________
UCC Chair Signature/Date:

______________________________
Academic Affairs Approval Signature/Date:

Office of the Registrar use ONLY

Date Rec’d: Date Completed: Entered: SCACRSE SCADETL SCARRES SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix RFIM b. Number 110 c. Enter Contact Hours per week in boxes.
LECTure LAB Seminar

d. INDependent Study ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: Intro to Hospitality Industry

UCC Chair Signature/Date: ___________________________ / /

Academic Affairs Approval Signature/Date: ___________________________ / /

Office of the Registrar use ONLY

Date Rec'd: _____ Date Completed: _____ Entered: SCACRSE _ SCADET _ SCARRES _ SCAPREQ

FORM F
Rev. September 2012
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix RFIM
b. Number 190

c. Enter Contact Hours per week in boxes.

  LECTure

  LAB

  Seminar

d. INDependent Study

  Practicum: (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Special Topics in RFIM

UCC Chair Signature/Date: ____________________________ / __________

Academic Affairs Approval Signature/Date: ____________________________ / __________

Office of the Registrar use ONLY

Date Rec’d: _______ Date Completed: _______ Entered: SCACRS __ SCAETL __ SCARRS __ SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix: MGMT  
b. Number: 410  
c. Enter Contact Hours per week in boxes.
   Lecture  
   Lab  
   Seminar  

d. Ind/Dependent Study  
   Practicum:  
   (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Small Business Sys-Operations

UCC Chair Signature/Date:  

Academic Affairs Approval Signature/Date:  

Office of the Registrar use ONLY

Date Rec’d: __Date Completed: ___ Entered: SCACRSE SCADETL SCARRES SCAPREQ
Laine, I asked the folks downstairs to check our course purge list against MyDegree. Attached is a report from Jim that shows a couple courses that are still tied to specific programs.

Specific courses that will not be deleted at this time are:

BLAW 411
BUSN 352
MGMT 371
MGMT 430
ECOM 200
ACCT 205
ACCT 231
ISYS 202
ISYS 310
MISM 691
MMBA 505

If the departments want to remove these courses, they will need to complete a formal curriculum proposal.

Thank you for all you help with this. We still have a sizeable list of courses that are to be removed.

Mo
Hi Mo,

Here is the College of Business report of Classes that are still active in MyDegree. You can see that Catalog Year end some might not be active, but when the catalog year is 9999 that means “til the end of time”.

Thanks.

James A. Lindsey
Information Systems Analyst
Enrollment Services
1201 South State Street, CSS 101
Big Rapids, MI 49307-2747
Phone: 231-591-2782
E-mail: lindseyj@ferris.edu

From: Maureen K Milzarski
Sent: Wednesday, April 22, 2015 8:47 AM
To: Kathy L Fisher; James A Lindsey
Subject: Form A for course purge

These have not been signed, but this will give you opportunity to check to insure the courses do not impact checksheets.

Thank you for your help!

Maureen Milzarski | Administrative Secretary to the Associate Provosts
Ferris State University | Office of the Provost and Vice President for Academic Affairs
1201 S. State St. - CSS 310F | Big Rapids, MI 49307
(231) 591-3532 office - (231) 591-3592 fax | Academic Affairs website

This message may contain confidential and/or proprietary information and is intended for the person/entity to which it was originally addressed. Any use by others is strictly prohibited.
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**Blocks found referencing course = ISYS 202**

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**Blocks found referencing course = ACCT 231**
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix BUSN  
   b. Number 352  
   c. Enter Contact Hours per week in boxes.
   
   LECTure  
   LAB  
   Seminar

   d. INDependent Study  
      Practicum:  
       (Check (x) box as appropriate. See definitions in Appendix E.)

   e. Full Course-Title: Human Factors-Office Automate

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

Office of the Registrar use ONLY

Date Rec'd:  Date Completed:  Entered: SCACRSE  SCADETL  SCARRES  SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix MGMT
b. Number 371

c. Enter Contact Hours per week in boxes.

D. INDependent Study ☐
Practicum: ☐

Check (x) box as appropriate. See definitions in Appendix E.

e. Full Course Title: Production-Operations MGMT

__________________________________________
UCC Chair Signature/Date: /

__________________________________________
Academic Affairs Approval Signature/Date: /

Office of the Registrar use ONLY

Date Rec'd: Date Completed: Entered: SCACRSE SCADTL SCARRES SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E: Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

  a. Course Prefix MGMT  b. Number 430  c. Enter Contact Hours per week in boxes.
  d. INDependent Study ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.]
  e. Full Course Title: Inventory — Supply Management

UCC Chair Signature/Date:

Academic Affairs Approval Signature/Date:

Office of the Registrar use ONLY

Date Rec’d: ___ Date Completed: ___ Entered: SCACRSE ___ SCADETL ___ SCARES ___ SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ECOM  
   b. Number 200  
   c. Enter Contact Hours per week in boxes.
      LECTure LAB Seminar  
   d. INDependent Study ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.)
   e. Full Course Title: World of E-Commerce

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

Office of the Registrar use ONLY
Date Rec'd: ___________ Date Completed: ___________ Entered: SCACRSE SCADET _ SCARRES _ SCAPREQ
I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT  

b. Number  205  

c. Enter Contact Hours per week in boxes.

D. INDependent Study  

[ ] Practicum:  

[ ] Seminar  

[ ] Lecture  

[ ] Lab  

[ ] (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Managerial Accounting

UCC Chair Signature/Date:  

/  

/  

Academic Affairs Approval Signature/Date:  

/  

/  

Office of the Registrar use ONLY

Date Rec'd:  

Enter:  

Date Completed:  

SCACRSE  

SCADETL  

SCARRES  

SCAPREQ
Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E, Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ACCT
b. Number 231

c. Enter Contact Hours per week in boxes.
   Lecture
   Lab
   Seminar

d. INDependent Study ☐ Practicum: [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: Payroll Accounting

UCC Chair Signature/Date:________________________/______

Academic Affairs Approval Signature/Date:________________________/______

Office of the Registrar use ONLY

Date Rec’d:____ Date Completed:____ Entered: SCACRSE SCADTL SCARRES SCAPREQ
+ Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ISYS  b. Number 202  c. Enter Contact Hours per week in boxes.
   Leisure LAB Seminar

   d. INDependent Study ☐ Practicum: ☐

   (Check (x) box as appropriate. See definitions in Appendix E.)

   e. Full Course Title: Principles of Information Systems

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

Office of the Registrar use ONLY

Date Rec’d: __ Date Completed: ___ Entered: SCACRSE __ SCADTL __ SCARRES __ SCAPREQ
+ Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix ISYS
b. Number 310

c. Enter Contact Hours per week in boxes.
   Lecture  Lab  Seminar

d. INDependent Study ☐ Practicum:

   (Check (x) box as appropriate. See definitions in Appendix E.)

e. Full Course Title: Novell Network Administration

UCC Chair Signature/Date: ____________________________

Academic Affairs Approval Signature/Date: ____________________________

Office of the Registrar use ONLY

Date Rec'd: __ Date Completed: ___ Entered: SCACRS __ SCADETL __ SCARRES __ SCAPREQ
+ Delete a Course
Course Data Entry Form

I. ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term: Spring Year 2015

II. CURRENT COURSE TO BE DELETED FROM CATALOG:

a. Course Prefix: MISM  
b. Number: 691  
c. Enter Contact Hours per week in boxes.
   LECTure       LAB       Seminar

d. INDependent Study ☐  Practicum:  [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: ISM Internship

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

Office of the Registrar use ONLY

Date Rec'd: ___ Date Completed: ___ Entered: SCACRSE SCADETL SCARRES SCAPREQ
I. **ACTION TO BE TAKEN: DELETE COURSE FROM CATALOG.**

The course listed below will be removed from the Ferris State University Catalog.
(See Appendix E Instructions for Completing Forms.)

a. Desired Term Effective: Term Spring Year 2015

II. **CURRENT COURSE TO BE DELETED FROM CATALOG:**

a. Course Prefix MMBA  

b. Number 595  
c. Enter Contact Hours per week in boxes:
   Lecture  
   Lab  
   Seminar

d. INDependent Study ☐ Practicum: ☐ [Check (x) box as appropriate. See definitions in Appendix E.]

e. Full Course Title: Numerical and Data Analysis

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Office of the Registrar use ONLY

Date Rec'd: __ Date Completed: __ Entered: SCACRSE __ SCADETL __ SCARRES __ SCAPREQ
Attached is the Form A I prepared for the courses that will be deleted from Banner that are no longer in use. If you could have David Nicol sign the form and send it back to me, I would appreciate it. I have prepared the Form F for all the courses noted on the Form A.

If you see any courses listed that should not be deleted, please let me know, and I can correct the form.

Thank you!

---

**This message may contain confidential and/or proprietary information and is intended for the person/entity to which it was originally addressed. Any use by others is strictly prohibited.**
Very strange since I recognize many of these as being deleted within other curriculum proposals and just not
Taken care of. One course is from the Office Automation Systems degree program deleted when Helen Popovich was
here. (really old!)
Since the courses have not been offered in years and years; obviously, MyDegree must be showing them as historic or
something.
We will look into this.

From: Maureen K Milzarski
Sent: Thursday, April 23, 2015 1:51 PM
To: Laine L Mitchell
Cc: Kirk E Weller
Subject: FW: Form A for course purge

Laine, I asked the folks downstairs to check our course purge list against MyDegree. Attached is a report from Jim that
shows a couple courses that are still tied to specific programs.

I will remove these courses from the Form A for the College of Business Course Purge.

Specific courses that will not be deleted at this time are:

BLAW 411
BUSN 352
MGMT 371
MGMT 430
ECOM 200
ACCT 205
ACCT 231
ISYS 202
ISYS 310
MISM 691
MMBA 505

If the departments want to remove these courses, they will need to complete a formal curriculum proposal.

Thank you for all you help with this. We still have a sizeable list of courses that are to be removed.

Mo
Hi Mo,

Here is the College of Business report of Classes that are still active in MyDegree. You can see that Catalog Year end some might not be active, but when the catalog year is 9999 that means “til the end of time”.

Thanks.

James A. Lindsey
Information Systems Analyst
Enrollment Services
1201 South State Street, CSS 101
Big Rapids, MI 49307-2747
Phone: 231-591-2782
E-mail: lindseyj@ferris.edu

From: Maureen K Milzarski
Sent: Wednesday, April 22, 2015 8:47 AM
To: Kathy L Fisher; James A Lindsey
Subject: Form A for course purge

These have not been signed, but this will give you opportunity to check to insure the courses do not impact checksheets.

Thank you for your help!
### PROPOSAL SUMMARY AND ROUTING FORM

**Proposal Title:** Course purge of College of Business courses no longer in use

**Initiating Individual:** Maureen Milzarski  **Initiating Department or Unit:** College of Business

**Contact Person's Name:** David Nicol  **Email:** DavidNicol@ferris.edu  **Phone:** 591-2422

- [ ] Group I-A – New Degree, major, concentration, minor, or redirection of a current offering
- [ ] Group I-B – Deletion of a degree, major, concentration, or minor
- [ ] Group II-A – New Course, modification of a course, deletion of a course
- [x] Group II-B – Minor Curriculum Clean-up
- [ ] Group III – Certificate (☐ College Credit ☐ Non-credit ☐ New Certificate)
- [ ] Group IV – Other site location (☐ College Credit ☐ Non-credit )

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<tr>
<td>Senate **</td>
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<td>_ Hold</td>
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<tr>
<td></td>
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<td>_ Not Support</td>
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</table>

* * Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

** Number Count must be given for all members present and/or voting.

To be completed by Academic Affairs  

** Date of Implementation: Click here to enter text.**

President (Date Approved)  

Board of Trustees (Date Approved)  

Academic Officers of MI (Date Approved)
1. Proposal Summary: (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights)
   All courses to be deleted from Banner are no longer in use for the College of Business. Courses should not affect program check sheets within or outside the College of Business.

2. Summary of Curricular Action (Check all that apply to this proposal)

   - [ ] Degree
   - [ ] Major
   - [ ] Minor
   - [ ] Concentration
   - [ ] Certificate
   - [ ] Course
   - [ ] New
   - [ ] Modification
   - [ ] Deletion

   Name of Degree, Major, etc.: [Click here to enter text.]

3. Summary of All Course Action Required: [Click here to enter text.]

   A. Newly Created Courses to be Added to the Catalog

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
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</tbody>
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   B. Courses to be Deleted from FSU Catalog

<table>
<thead>
<tr>
<th>Prefix</th>
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<tbody>
<tr>
<td>MTED 520</td>
<td>Information Systems Mgmt</td>
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<td>MTED 540</td>
<td>Multimedia Instruction-Design</td>
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<tr>
<td>MTED 550</td>
<td>Tech Assessment-Procurement</td>
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<td>MTED 560</td>
<td>Productivity Systems</td>
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<td>BLAW 411</td>
<td>Legal Env-Sport-Resort Mgmt</td>
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<td>BUSN 352</td>
<td>Human Factors-Office Automate</td>
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<td>HOMT 397</td>
<td>Special Studies in HOMT</td>
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<td>Special Topics in INSR</td>
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<tr>
<td>INSR 490</td>
<td>Special Topics in INSR</td>
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<tr>
<td>MGMT 371</td>
<td>Production-Operations MGMT</td>
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<td>MGMT 430</td>
<td>Inventory – Supply Management</td>
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<tr>
<td>MGMT 484</td>
<td>Contemporary Management Trends</td>
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<tr>
<td>MGMT 499</td>
<td>Strategy-Business Policy</td>
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<td>ADVG 397</td>
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<td>ADVG 497</td>
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<td>World of E-Commerce</td>
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<td>Career Planning – Accountants</td>
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<td>Accounting Theory</td>
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<td>ACCT 513</td>
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<td>ACCT 525</td>
<td>Quantitative Methods-ACCT</td>
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<td>Acct Systems and Controls 2</td>
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<td>Fed Income Tax-Business</td>
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<td>ACCT 558</td>
<td>Tax Research Methodology</td>
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<td>ACCT 561</td>
<td>Principles of Fund Accounting</td>
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<td>ACCT 590</td>
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<td>ACCT 599</td>
<td>Micro Applications in ACCT</td>
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<td>ACCT 611</td>
<td>Financial Statement Analysis</td>
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<td>ACCT 618</td>
<td>Issues in Financial Accounting</td>
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<td>ACCT 628</td>
<td>Issues in Management ACCT</td>
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<td>ACCT 655</td>
<td>Estate and Gift Tax</td>
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<td>ACCT 656</td>
<td>Tax Factors in Business</td>
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<tr>
<td>ACCT 668</td>
<td>Govt and Not For Profit ACCT</td>
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<tr>
<td>ACCT 670</td>
<td>Thesis Project</td>
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</table>
ACCT 690  Special Topics in Accountancy
ACCT 697  Special Studies in ACCT
ISYS 202  Principles of Information Systems
ISYS 310  Novell Network Administration
MISM 655  E-Business Strategy
MISM 690  Special Topics in ISM
MISM 697  Special Studies in ISM
RFIM 110  Intro to Hospitality Industry
RFIM 190  Special Topics in RFIM
MGMT 410  Small Business Sys-Operations
MISM 691  ISM Internship
MMBA 505  Numerical and Data Analysis

C. Existing Courses to be Modified

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D. Addition of existing FSU courses to program

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E. Removal of existing FSU courses from program

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4. Summary of All Consultations

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<th>Date Sent</th>
<th>Responding Department</th>
<th>Date Received &amp; By Whom</th>
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5. Will External Accreditation be sought? (For new programs or certificates only)

- [ ] Yes
- [ ] No

If yes, name the organization involved with accreditation for this program. Click here to enter text.

6. Is a PCAF required?  [ ] Yes  [ ] No

Is the PCAF approved?  [ ] Yes  [ ] No

If yes, supply link on Academic Affairs website where PCAF is posted.

7. Program Checksheets affected by this proposal (Check all that apply to this proposal)

- [ ] Add Course
- [ ] Delete Course
- [ ] Modify Course
- [ ] Change Prerequisite
- [ ] Move from required to elective
- [ ] Move from elective to required
- [ ] Change Outcomes and Assessment Plan
- [ ] Change Credit hours

8. List all Checksheets affected by this proposal:

<table>
<thead>
<tr>
<th>College</th>
<th>Department</th>
<th>Program</th>
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