Course Change Request

Indiana University

Check Appropriate Boxes: Undergraduate credit [ ] Graduate credit [ ] Professional credit [ ]

1. School/Division: School of Social Work
2. Academic Subject Code: SWK
3. Current Course Number: 5710
4. Current Credit Hours: 3
5. Current Title: ProSeminar on Client Systems
6. Effective Semester/Year for changes listed below: Spring 2009
7. Instructor: Jim Daley

8. Change course number to: (must be cleared with University Enrollment Services)
   - [ ]
9. Current course title: ProSeminar on Client Systems
   Change to: Social Work Theories of Human and Social Behavior
   Recommended abbreviation (optional): Social Work Theories
   (Limited to 32 Characters including spaces)
   - [ ]
10. Current credit hours fixed at: 3 or variable from: ______ to ______
11. Current lecture contact hours fixed at: ______ or variable from: ______ to ______
12. Current non-lecture contact hours fixed at: ______ or variable from: ______ to ______
13. Is this course currently graded with S-F (only) grades? Yes No [ ]
   Change to S-F (only) grading? Yes [ ] No [ ]
14. Does this course presently have variable title approval? Yes No [ ]
   Is variable title approval being requested? Yes [ ] No [ ]
15. Is this course being discontinued? For all campuses [ ] or for this campus only [ ]
16. Current course description: [ ]
   Change course description to (not to exceed 50 words)
   - [ ]
17. Justification for change: To more clearly reflect the focus of the course.
   (Use additional paper if necessary)
18. Are the necessary reading materials currently available in the appropriate library? Yes [ ]
19. A copy of every new course proposal must be submitted to departments, schools, or divisions in which there may be overlap of this course with existing courses or areas of strong concern, with instructions that they send comments directly to the originating Curriculum Committee. Please append a list of departments, schools, or divisions thus consulted.

Submitted by: Margaret E. Adamek Date 4/16/08
Department Chairman/Division Director

Approved by: Michael E. Fitch Date 4/16/08
Dean

Date
Chancellor/Vice-President

Date
University Enrollment Services

After School/Division approval, forward the last copy (without attachments) to University Enrollment Services for initial processing, and the remaining four copies and attachments to the Campus Chancellor or Vice-President.

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