Course Change Request

1. School/Division: School of Social Work
2. Academic Subject Code: SWK-S
3. Current Course Number: 3662
4. Current Credit Hours: 3
5. Current Title: Assessment in Mental Health and Addictions
6. Effective Semester/Year for changes listed below: Summer 09

Type of Change Requested (Check appropriate boxes and indicate changes)

☒ 8. Change course number to: 5517 (must be cleared with University Enrollment Services)

☐ 9. Current course title: 
   Change to: 
   Recommended abbreviation (optional) 
   (Limited to 32 Characters including spaces)

☐ 10. Current credit hours fixed at: ______ or variable from: ______ to ______
    Change to credit hours fixed at: ______ or variable from: ______ to ______

☐ 11. Current lecture contact hours fixed at: ______ or variable from: ______ to ______
    Change to lecture contact hours fixed at: ______ or variable from: ______ to ______

☐ 12. Current non-lecture contact hours fixed at: ______ or variable from: ______ to ______
    Change to 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: Curriculum has been restructured so that this course falls earlier in the curriculum for MSW students.

18. Are the necessary reading materials currently available in the appropriate library?

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: ____________________________ Date 3/5/09

Dean of Graduate School (when required) ____________________________ Date

Approved by: ____________________________ Date 3/5/09

Dean

Chancellor/Vice-President

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.

B 81 62030 UPS 725

University Enrollment Services Final—White; Chancellor/Vice-President—Blue; School/Division—Yellow; Department/Division—Pink; University Enrollment Services Advance—White