Course Change Request

<table>
<thead>
<tr>
<th>Check Appropriate Boxes:</th>
<th>Undergraduate credit</th>
<th>Graduate credit</th>
<th>Professional credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. School/Division</td>
<td>Medicine/Graduate</td>
<td></td>
<td></td>
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<tr>
<td>2. Academic Subject Code</td>
<td>Grad-6</td>
<td></td>
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<tr>
<td>3. Current Course Number</td>
<td>F715</td>
<td></td>
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<td>4. Current Credit Hours</td>
<td>1</td>
<td></td>
<td></td>
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<tr>
<td>5. Current Title</td>
<td>Physiology of coronary circulation</td>
<td></td>
<td></td>
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<tr>
<td>6. Effective Semester/Year for changes listed below:</td>
<td>Spring 2010</td>
<td></td>
<td></td>
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<tr>
<td>7. Instructor:</td>
<td>Tune</td>
<td></td>
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</table>

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

- [x] Change course number to: G*70.3 (must be cleared with University Enrollment Services)
- [ ] Current course title:
  - Change to: 
    - Recommended abbreviation (optional) (Limited to 32 Characters including spaces)
  - Change to credit hours fixed at: ___________ to ___________
  - Change to lecture contact hours fixed at: ___________ to ___________
  - Change to non-lecture contact hours fixed at: ___________ to ___________

- [ ] Is this course currently graded with S-F (only) grades? Yes ___ No ___
  - Change to S-F (only) grading? Yes ___ No ___

- [ ] Does this course presently have variable title approval? Yes ___ No ___
  - Is variable title approval being requested? Yes ___ No ___

- [ ] Is this course being discontinued? For all campuses ___ or for this campus only ___

- [ ] Current course description ________________________________
  - Change course description to (not to exceed 50 words) ______________________

- [ ] Justification for change consistency with available PhD minors (Use additional paper if necessary)

- [ ] Are the necessary reading materials currently available in the appropriate library? ___ yes ___ no ___

- [ ] 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: 8/25/09

Department Chairman/Division Director ___________________________

Dean of Graduate School (when required) ___________________________

Approved by: ___________________________ Date: 8/31/09

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.

UPS 725

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