Course Change Request

Indiana University

IUPUI Campus

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

1. School/Division: IUPUI Honors College
2. Academic Subject Code: HON-H
3. Current Course Number: HON 200
4. Current Credit Hours: VAR
5. Current Title: Interdepartmental Colloquia
6. Effective Semester/Year for changes listed below: Fall 2010
7. Instructor:

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

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

☑ 9. Current course title: Interdepartmental Colloquia
   Change to: Honors Interdepartmental Colloquia
   Recommended abbreviation (optional)
   (Limited to 32 Characters including spaces)

10. Current credit hours fixed at: __________ 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
   Change to IUPUI Honors College from honors program
   (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: ___________________________ Date ___________ Approved by: ___________________________ Date 07.27.10

Department Chairman/Division Director ___________________________ Date ___________

Dean of Graduate School (when required) ___________________________ Date ___________

Chancellor/Vice-President ___________________________ Date ___________

University Enrollment Services ___________________________ Date ___________

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