Course Change Request

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

1. School/Division: School of Health & Rehabilitation Sciences/Dept of Occupational Therapy
2. Academic Subject Code: AHLT
3. Current Course Number: T625
4. Current Credit Hours: 2
5. Current Title: Research & Reflective Seminar II
6. Effective Semester/Year for changes listed below: Fall 2007

Check boxes as appropriate:

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

☒ 9. Current course title: Research & Reflective Seminar II
   Change to: Reflective Seminar II
   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 [x]
    Change to S-F (only) grading? Yes [ ] No [ ]

☐ 14. Does this course presently have variable title approval? Yes [ ] No [x]
    Is variable title approval being requested? Yes [ ] No [ ]

☐ 15. Is this course being discontinued? For all campuses [ ] or for this campus only [x]

☐ 16. Current course description ______________________________________________________________

Change course description to (not to exceed 50 words) __________________________________________

17. Justification for change: The focus of the seminar is reflection; research is only a part of the course.

☐ 18. Are the necessary reading materials currently available in the appropriate library? Yes [ ] No [ ]

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 1/18/07

Department Chairman/Division Director

Approved by: ____________________________ Date 1/19/07

Dean

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.