**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>
</table>

1. School/Division: **INFORMATICS**

2. Academic Subject Code: **HIA-M**

3. Current Course Number: **485**

4. Current Credit Hours: **1-3**

5. Current Title: **Health Information Enrichment**

6. Effective Semester/Year for changes listed below: **Spring 2007**

7. Instructor: **Forsey**

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**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: ____________________________
   - 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) ____________________________

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17. Justification for change: **Curriculum revision requires students to take additional hours in this 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.

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Submitted by: ____________________________ Date: **11-1-06**

Department Chairman/Division Director:

Dean of Graduate School (when required): ____________________________ Date: ____________________________

Approved by: ____________________________ Date: **10/30/06**

Dean:

Chancellor/Vice-President:

University Enrollment Services:

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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.

**University Enrollment Services**