CBM003 ADD/CHANGE FORM

☐ Undergraduate Council
☐ New Course  ☐ Course Change
Core Category:  ☐ Effective Fall 2006

☐ Graduate/Professional Studies Council
☐ New Course  ☐ Course Change
Effective Fall

1. Department: MCL  College: CLASS
2. Person Submitting Form: Dr. Glass  Telephone: 530419
3. Course Information on New/Revised course:
   • Instructional Area / Course Number / Long Course Title:
     GERM / 4391 / Professional Pracicum in a German-speaking country
   • Instructional Area / Course Number / Short Course Title (30 characters max.):
     GERM / 4391 / PROFESSIONAL PRACTICUM
   • SCH 3.00  Level: SR  CIP Code: 16091001  Lect Hrs.: 2  Lab Hrs.: 0
4. Justification for adding/changing course: To reflect change in prerequisite course
5. Was the proposed/revised course previously offered as a special topics course? ☐ Yes  ☑ No
If Yes, please complete:
   • Instructional Area / Course Number / Long Course Title:
     —/—/—
   • Content ID: —  Start Date: yyyy/mm/dd
6. Is this course offered for undergraduate credit only? ☐ Yes  ☐ No
7. Authorized Degree Program(s): GERMAN / GERMAN AREA STUDIES
   • Does this course affect major/minor requirements in the College/Department? ☐ Yes  ☐ No
   • Does this course affect major/minor requirements in other College/Departments? ☐ Yes  ☐ No
   • Are special fees attached to this course? ☐ Yes  ☐ No
   • Can the course be repeated for credit? ☐ Yes  ☐ No
8. Grade Option: Letter (A, B, C, . . .)  Instruction: Type: practicum
9. If this form involves a change to an existing course, please obtain the following information from the course inventory:
   Instructional Area / Course Number / Long Course Title
   GERM / 4391 / PROFESSIONAL PRACTICUM IN A GERMAN SPEAKING COUNTRY
   Start Date: yyyy/mm/dd: 1999/4  Content ID: 25579
10. Proposed Catalog Description:
    Copy/rev: 3rd  Pre-requisites: GERM 3334 and consent of instructor  Description (30 words max.): Hand-on work in field of study in selected businesses in German speaking countries. Written report to evaluate and integrate practical experience.
11. Dean's Signature: __________________________  Date: 9/18/05
Print/Type Name: Sarah Fishman

APPROVED OCT 1 9 2005

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