Undergraduate Council  
Graduate/Professional Studies Council

Course Category:  
Core Category: 

Department:  
Course: 
Course Change  
Effective Fall:

1. Department:  
   College:  
   Class:

2. Person Submitting Form:  
   Telephone:

3. Course Information on New/Revised course:
   - Instructional Area / Course Number / Long Course Title:
     COMD / 4499 / Clinical Procedures
   - Instructional Area / Course Number / Short Course Title (30 characters max.):
     COMD / 4499
   - SCR: 4.00
   - Level: SR
   - CIP Code: 51.0399.0014
   - Lect Hrs: 3.0
   - Lab Hrs: 0.0

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 (yyyyy):  ___

6. Is this course offered for undergraduate credit only?  
   Yes  No

7. Authorized Degree Programs:
   COMD BA and COMD BS
   - 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 social 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:

9. If this form involves a change to an existing course, please obtain the following information from  
   the course inventories:  
   Instructional Area / Course Number / Long Course Title:
   COMD / 4499 / Clinical Procedures
   - Start Date (yyyyy):  2003
   - Content ID:

10. Proposed Catalog Description:
    - Pre-requisites: COMD 3300, COMD 3371
    - Description (30 words max.):
    - GPA in major or concentration:

11. Dean’s Signature:  
    Date:  ___/___/___

Print/Type Name:  

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