

**Academic Senate**  
Agenda for the Meeting of  
November 7<sup>th</sup>, 2017  
**UCB 202A**  
**10:00 - 11:50 am Session**

1. Call to Order and Roll Call
2. Approval of Minutes
  - A. October 3<sup>rd</sup>, 2017 Minutes
3. Open Forum
4. Reports
  - A. Senate President – Charles Bacon
  - B. Senate Vice President – Sandy Alspach
  - C. Senate Secretary – Melinda Isler
5. Committee Reports
  - A. Academic Program Review Council – Gary Todd
  - B. University Curriculum Committee – Rusty Leonard
  - C. Student Government – Patrick Maloney
  - D. General Education Committee – Kristin Conley
  - E. Arts and Lectures Committee – Bernadette Fox
6. Old Business
7. New Business
8. Conversations with the Senate
  - A. Budget Report – Sally DePew and David Eisler
  - C. ADA Compliance – Jackie Hughes and Amy Greene
  - D. Linked Course Panel – Erin Militzer-Benander, Melissa Smith, Anil Venkatesh, Kirk Weller
9. Announcements
  - A. FSU President - David Eisler
  - B. Provost – Paul Blake
  - C. Senate President – Charles Bacon
10. Open Forum

**Minutes  
Ferris State University  
October 3, 2017- 10:00 a.m.**

Members in Attendance: Epps, Zyla, Moore, Alspach, Berghoef, Gray, Thomson, Bacon, Daubert, Conley, Weaver, Balanda, Johnson, Stone, Fadayomi, Marion, Bajor, Inabinett, Shimko, Isler, Wyss, Ing, Aslakson, Fox, Baran, Axford, Bright, Hanna, Rumpf, Desmond, Todd, Maike, Zube, Calkins  
 Members absent with cause: Wolfer, VanLent, Dinardo, Drake,  
 Members absent: Wancour  
 Ex-Officio and Guests: Maixner, Nicol, Reifert, Adeyanju, Damari, Schult, Durst, Johnson, Blake, Eisler, Franklund Carrie, Franklund Clifton, Johnson Leonard, Hawkins, Jackson, Bentley, Haik, Leonard, Teahan, Woolen

1.	President Bacon called the meeting to order at 10:05 a.m.
2.	<b>Approval of Minutes.</b> Senator Zyla moved to approve the minutes. Senator Epps seconded. Secretary Isler noted some corrections had been submitted prior to the meeting which had been corrected. Senator Fox asked about her placement in the attendance and Secretary Isler noted that was one of the corrections made. The motion passed 93% to 4% with 3% abstaining.
3.	<b>Open Forum.</b> Vice-President Alspach noted she was wearing pink to honor cancer awareness month. She also noted that on Thursday there was going to be a pep rally to introduce the student dawg pound for hockey. She also noted an upcoming sports speaker Mark Miller on October 23 <sup>rd</sup> who is a sports agent and Ferris graduate. Finally she noted the unified volleyball match which pairs Ferris athletes with special Olympians to raise awareness.  Senator Marion noted that a Ferris graduate working at Johnson Controls will be bringing a truck to campus to interview talent and talk about innovations on October 5 <sup>th</sup> behind Wink Arena.  Senator Maike noted that there would also be new donations for Heavy Equipment arriving on campus and available for viewing.  Administrative Assistant Sylvia Maixner noted that Arts and Lectures was bringing Nell Painter on campus October 6 <sup>th</sup> in the University Center.
4.	<b>Officer Reports/ President Report</b> President Bacon welcomed the new non tenure-track Senators Paul Zube, Bernadette Fox and Keith Calkins to the Senate. They were elected unopposed. He also read a statement noting the role of the Academic Senate in curriculum proposal process and the importance of being able to support proper curricular functions.  Vice-President Alspach thanked all for volunteering to serve on Senate committees. She noted that she is learning a lot in the process about appointment committees and thanked Gary Todd for continuing to serve on the Radiation Committee (and the fact that the item for removing that appointment has been removed from the agenda). There is new training scheduled for committee chairs.  Secretary Isler asked for 4 volunteers to serve on the Rules Committee. This committee reviews the charter, gathers feedback and makes recommendations to the Senate for any charter modifications. Anyone interested please contact her after the meeting.
5.	<b>Committee Reports</b> APR chair Gary Todd spoke on some changes that are being proposed. He has made some modifications to the committee schedule in order to compress the calendar and hopefully make it less burdensome to committee members. There has been difficulty in recruiting enough committee members. He made a motion to approve the change in date of report submission for non-accredited programs from August 15 to September 1. A second motion moves the date in report submission from accredited program was moved from August 15 to September 1. Both were seconded by Secretary Isler. The accredited programs will now be reviewed first. Senator Thomson asked how many programs reviewed each year. Senator Todd said 18-20 but in this year that was

	<p>greatly increased by the number of reports which were sent back. Senator Gray asked if the intention was to alternate having non-accredited programs go first. Senator Todd, said no, this was a permanent switch. The first motion passed 100%. The second motion passed with 97% in favor and 3% abstaining.</p> <p>UCC Chair Rusty Leonard reported that the committee has been meeting weekly and two proposals were being brought forward to the Senate for approval. They are working on making the UCC policy on academic minors (and others) to be consistent with the Academic Affairs policy. They are coordinating with the registrars office to make workflow more smooth. They are also revising forms which should be coming to the senate soon.</p> <p>General Education coordinator Cliff Franklund spoke on the General Education Committee. He said that the committee is beginning to implement the systematic assessment. Of the 242 courses on the books, at least 144 have identified a scale for evaluation. He noted that a new form for course review has been created and those forms will become part of the permanent record. There will be training sessions on these forms in the library this week.</p> <p>Senator Drake, Elections chair was not available to attend the meeting. President Bacon gave the report on the non-tenure track faculty elections.</p>
7.	<p><b>Motion to create an Academic Senate special appointment to the General Education Committee</b>  Vice-President Alspach made a motion to create an Academic Senate special appointment to the General Education Committee. Seconded by Senator Ing. Alspach explained this formalized the process for a continuing appointment to the committee, that had been introduced in the previous senate year. Motion passed 97% to 3%.</p>
8.	<p><b>Deletion of Pre-Social Work Program</b>  Senator Weaver moved to delete the pre-social work program. Seconded by Senator Berghoef. Berghoef explained this was a cleanup of a program no longer on the books, as it had been converted to an associates degree. Motion passed 100% to 0.</p>
9	<p><b>Religious Studies minor deletion and course cleanup</b>  Senator Zyla moved to delete the Religious Studies minor. Senator Gray seconded. Senator Moore asked if these related to APR reports. UCC chair Leonard said yes. Senator Hanna asked if it was being closed because of lack of faculty. Senator Gray said the department head and subsequent chair had asked faculty several times within the area but none were willing to be a champion for the program. Motion passed 90% to 7% with 3% abstaining.</p>
10	<p><b>Announcements</b>  President Eisler noted the many disasters occurring in the country. He asked everyone to make sure they had the ability to receive text messages in case of an emergency on the Ferris campus. He noted that he is watching the legislature to make sure that the proposal to eliminate the state income tax does not return. While this may mobilize individuals it would prove a disaster for the economies of universities. He discussed the successful Homecoming weekend, including the record-setting gift of the Golden Eagles from Pharmacy who donated \$101,000 and the awarding of the Pacesetter and Alumni Awards. He encouraged all to come to the budget forum on October 11<sup>th</sup>.</p> <p>Provost Blake discussed his appreciation for all the great work faculty are doing. He specifically noted the Shoah project, the College of Business Diversity and Inclusion program, the Health fair held in Grand Rapids, the Spathelf lecture, the robotics competition and the new opioid task force. He also noted that the grandson of Cesar Chavez, Andre was coming to speak on campus October 17<sup>th</sup>.</p>
11.	<p><b>Open Forum</b>  Senator Zyla noted the Zeta girls would be having a color run to benefit raising funds for breast cancer. Senator Calkins mentioned the blood drive on October 5<sup>th</sup>. Senator Johnson noted that two Social Sciences staff members had family in Puerto Rico and her students were working on projects to help them.</p>
12.	<p>Senator Marion made a motion to adjourn. Senator Zyla seconded. Motion passed 100% to 0%. Meeting adjourned at 11:10 a.m.</p>


Linked Course/C4 ProjectPanelists

**Erin R. Militzer-Benander, Associate Professor, Mathematics**

**Melissa S. Smith, Assistant Professor, Languages & Literature**

**Anil Venkatesh, Assistant Professor, Mathematics**

**Kirk Weller, Academic Department Head, Mathematics**

The Linked Course Project is an interdisciplinary collaboration between the Mathematics Department, the Department of English, Literature and World Languages, the College of Business, and the School of Education. Three pairs of mathematics and composition faculty have been involved in it since 2013. As a part of the project, Math students learn how to express mathematical ideas in writing, and the writing students learn how to interpret reading assignments from a quantitative perspective. The overarching goal of the project is to help students to develop problem-solving abilities and critical thinking skills through an interdisciplinary connection that involves mathematics, reading, and writing.

The C4 (Cross-Curricular Career Community) Scholar Program is a yearlong learning community for students who need remediation in English composition, mathematics, and reading. It has been in existence since the fall of 2016. Student participants, selected randomly from General Studies students in Retention and Student Success, take English composition, mathematics, and reading as a two-semester cohort with a focus on the formation of a professional mindset. The project is part of a multi-year qualitative study to develop a scalable program to nurture formation of intellectual and emotional dispositions needed for long-term academic and professional success among at-risk students.

*Ballet Jörgen Presents*

# The Nutcracker

featuring a special appearance from Rhythmic Sky Studios

November 29 | 7:30 PM  
Williams Auditorium



**Ticket prices: Students with a valid ID \$5, General Admission \$7**

Tickets can be purchased online at "[www.ferris.edu/arts](http://www.ferris.edu/arts)" or at the Williams Auditorium box office one hour prior to event start time.

Anyone with a disability who needs special accommodations to attend this event should contact Williams Auditorium box office at 231-591-3676 at least 72 hours in advance.

Ferris State University is an equal opportunity institution. For information on the University's policy on non-discrimination visit "[www.ferris.edu/non-discrimination](http://www.ferris.edu/non-discrimination)".



Arts and Lectures Series

**The  
Following  
Are  
For  
Information  
Only**

**UCC Fast Track Form**

**I. Curricular Action:** Select from Option below. Any other options will use regular curricular change process.

- Pre-Requisite Changes    Co-Requisite Changes    Change Term Offered    Course Cap Change  
 Admission GPA Change

**II. Desired Term Effective Date (6-digit code):** 201801

NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.

**III. Proposal Rationale:** . Changing SONO 287 to be offered in the spring of the second year in the program to align the course properly with the new curriculum. This will change the prerequisite course to Sono 280.

**College:** HP - College of Health Professions

**Department:** DHMI - Dental Hygiene-Medical Imaging

**Program:** DMS

**Units Affected:** DMS only

**Date forwarded to all Units for Information:** 2/7/2017

	<i>Print and Sign your Name</i>	<i>Date</i>	<i>Vote/Action*</i>
Initiating Individual <i>Michelle Weemaes</i>	<i>M Weemaes</i>	<i>9/13/17</i>	
Department/School Chair <i>Theresa Raglin</i>	<i>Theresa A Raglin</i>	<i>9/13/17</i>	
College Curriculum Committee** <i>Emily Zyla</i>	<i>Emily Zyla</i>	<i>9/13/17</i>	<u>6</u> Support <u>0</u> Support with Concerns <u>0</u> Not Support <u>0</u> Abstain
Dean <i>Matthew Adeyaju</i>	<i>Matthew Adeyaju</i>	<i>9/14/17</i>	
University Curriculum Committee** <i>RUSS LEONARD</i>	<i>Russ Leonard</i>	<i>9/14/17</i>	<u>7</u> Support <u>  </u> Support with Concerns <u>  </u> Not Support <u>  </u> Abstain
Senate			
Academic Affairs			

\*Provide number count for each voting category.

\*\*Support with Concerns, Not Support or Abstain must include identification of specific concern with appropriate rationale.

**II. COURSE IDENTIFICATION: Sono 287 Management in DMS**

CURRENT					PROPOSED				
Prerequisite	Co-requisite	Term Offered	Course Cap Change	Admission GPA	Prerequisite	Co-requisite	Term Offered	Course Cap Change	Admission GPA
Sono 282		summer			Sono 280		Spring		

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ



**UCC Fast Track Form**

**I. Curricular Action:** Select from Option below. Any other options will use regular curricular change process.

- Pre-Requisite Changes  Co-Requisite Changes  Change Term Offered  Course Cap Change  
 Admission GPA Change

**II. Desired Term Effective Date (6-digit code):** 201801

NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.

**III. Proposal Rationale:** Pre-Requisite correction on MKTG 476 from MKTG 321 w/C- or higher and ECON 221 to MKTG 322 w/C- or higher and ECON 221 and Senior Status.

**College:** BU - College of Business

**Department:** MKTG - Marketing

**Program:** Marketing

**Units Affected:** Marketing Department

**Date forwarded to all Units for Information:**

	<i>Print and Sign your Name</i>	<i>Date</i>	<i>Vote/Action*</i>
Initiating Individual	<i>Laura Dix</i> LAURA DIX	9/12/17	
Department/School Chair	<i>Jeff Ek</i> Jeff EK	9/12/17	
College Curriculum Committee**	<i>Gerald Emerick</i> GERALD EMERICK	9/25/17	<input checked="" type="radio"/> Support <input type="radio"/> Support with Concerns <input type="radio"/> Not Support <input type="radio"/> Abstain
Dean	<i>David Neal</i> DAVID NEAL	9/20/17	
University Curriculum Committee**	<i>Russ Leonard</i> RUSS LEONARD	9/28/17	<input checked="" type="radio"/> Support <input type="radio"/> Support with Concerns <input type="radio"/> Not Support <input type="radio"/> Abstain
Senate	<i>Chris Man</i>	10/18/17	
Academic Affairs			

\*Provide number count for each voting category.

\*\*Support with Concerns, Not Support or Abstain must include identification of specific concern with appropriate rationale.

**II. COURSE IDENTIFICATION:** MKTG 476 Marketing Strategy

Course Prefix, Course Number – Course Title

**FTF-PREQ**

Effective Fall 2016

*Complete only fields that will change.*

CURRENT					PROPOSED				
Prerequisite	Co-requisite	Term Offered	Course Cap Change	Admission GPA	Prerequisite	Co-requisite	Term Offered	Course Cap Change	Admission GPA
MKTG 321 w/C- or higher and ECON 221					MKTG 322 w/C- or higher and ECON 221 and Senior Status				

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  CADETL,  SCARRES,  CAPREQ

## UCC Outcome Update Form

**I. Curricular Action:** Select from Option below. Any other options will use regular curricular change process.

- Updating Program Level Outcomes  
  Adding Outcomes to an Existing Program  
 Updating Course Level Outcomes  
  Adding Outcomes to an Existing Course

**II. Desired Term Effective Date (6-digit code):** 201801

NOTE: The first four digits indicate year, the next two digits indicate month in which term.

**III. Proposal Rationale:** There have been some minor changes to the CARE 100 course since the time the UCC Paperwork was submitted.

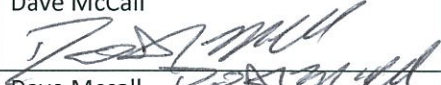

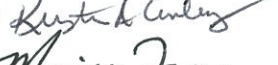

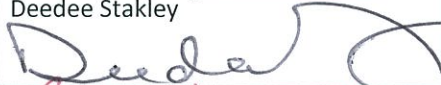
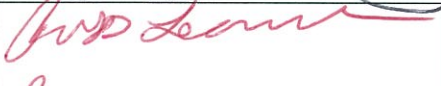

**College:** Choose a College from the dropdown   **Date forwarded to CCC:** 9/19/2017

**Department:** RSS - Retention & Student Success   **Date forwarded to Dean:** 9/19/2017

**Program:** Career Explortaion

**Units Affected:** Retention and Student Success

**Date forwarded to Units with Form B:** [Click here to enter a date.](#)

	<i>Print and Sign your Name</i>	<i>Date</i>	<i>Vote/Action*</i>
Initiating Individual	Dave McCall 	9/18/2017	
Department/ Program Faculty	Dave McCall  Kristin Conley  Monica Frees 	9/19/2017	<input checked="" type="checkbox"/> 3 Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain
Department/School Administrator	Deedee Stakley 	9/19/2017	
University Curriculum Committee**	 RUSS LEONARD	9/28/17	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain
Senate		10/18/17	
Academic Affairs			

\*Provide number count for each voting category.

\*\*Support with Concerns, Not Support or Abstain must include identification of specific concern with appropriate rationale.

### OFFICE OF THE REGISTRAR USE ONLY

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**II. COURSE INFORMATION:** Attach Completed Form EF for each course

**III. PROGRAM OUTCOMES:** Insert (or copy & paste) program outcomes here

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201801

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION: CARE 100 - Career Planning**

*Course Prefix, Course Number – Course Title*

If deleting a course **STOP HERE.**

For modification, complete all fields that will be changed.

If creating a course, complete all relevant fields.

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
						CARE	100	15	0	0	15
Title: Click here to enter text.						Title: Career Planning					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
						1		NA		NA	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Click here to enter text.						Career Planning (CARE) 100 explores both the career search process and the skills needed for successful employment and career development.					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Click here to enter text.						1. Students will explore their personal values, interests, and determine what is important to them in a career through self-assessments. 2. Students will learn the importance of setting goals by developing and monitoring at least two SMART Goals focused on short-term career oriented accomplishments. 3. Students will learn the value of having soft skills and a strong work ethic through reflective journaling.					
Course Outline including Time Allocation						Course Outline including Time Allocation					
Click here to enter text.						6 – 2.5 hour class sessions (15 hours total) Due to the fact that this course will be offered through many community partnerships, the allocation of time will depend on the institution running the course (i.e., 15 – 1 hour classes, 6 – 2.5 hour classes, etc.). However, the course outline will be as follows: 1 hour – Difference between a career and a job 2 hours – Attributes of being successful 2 hours – Values 2 hours - SMART Goals					

	6 hours - Career Soft Skills 2 hours - Career Assessments,
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- A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:
- Practicum
  - Independent Study
- B. College Code: Choose a College from the dropdown
- C. Department Code: Developmental Curriculum
- D. Credit Hours:
- Variable
  - Fixed
- E. Minimum Credit Hours: 1
- F. Maximum Credit Hours: 1
- G. Hours may be repeated for additional credit:
- No
  - Yes – If yes, max times repeated: Click here to enter text. **OR** max credits awarded: Click here to enter text.
- H. Levels:
- Undergraduate
  - Graduate
  - Professional
- I. Grade Method:
- Standard Letter Grading
  - Credit/No Credit
- J. Does the proposed course replace an equivalent course?
- No
  - Yes – If yes, enter equivalent course: Click here to enter text.
- Course Prefix, Number – Course Title*
- K. Term(s) Offered: Spring, Summer, Fall
- L. Max Section Enrollment:
- Seminar: 30
- Lab: Click here to enter text.

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**CURRICULUM PROPOSAL SUMMARY AND ROUTING FORM**

Proposal Title: Creation of CARE 100

Initiating Individual: Dave McCall

Initiating Department or Unit: Developmental Curriculum (RSS)

Contact Person's Name: Dave McCall

Email: davidmccall@ferris.edu

Phone: 591-2842

NOTE: ALL required forms must be completed and included BEFORE submission of the proposal to the University Curriculum Committee.	FORM (checkboxes indicate typically required forms specific to the curricular action)						
	PCAF Link	A	B-UND B-GRA	C	D	EF	FIN
PROPOSAL GROUP: See Table B-7 in the UCC Manual for description.							
I-A: New Degree, major, concentration, minor, or redirection of a current offering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I-B: Deletion of a degree, major, concentration, or minor		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
II-A: New Course, modification of a course, deletion of a course Check here if deleting a course		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
II-B: Minor Curriculum Clean-up		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III: Certificate ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit <input type="checkbox"/> New Certificate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Off Campus: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
IV: Non-degree Offering : Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
	PLEASE PRINT and SIGN YOUR NAME	DATE		VOTE/ACTION * Number Count			
Program Representative **	Dave McCall Monica Frees Kristin Conley			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain			
Department/School/Faculty Representative Vote **	Dave McCall Monica Frees Kristin Conley			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain			
Department/School Administrator	Deedee Stakley			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain			
College Curriculum Committee/Faculty	Dave McCall Monica Frees Kristin Conley			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain			
UCC Representative	Katherine Harris			<input type="checkbox"/> Support <input type="checkbox"/> Hold <input type="checkbox"/> Not Support			
Dean	Jason Bentley			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support			
University Curriculum Committee **				<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain			
Senate **				<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain			
Academic Affairs				<input type="checkbox"/> Support <input type="checkbox"/> Hold <input type="checkbox"/> Not Support			

\* Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

\*\* Number Count must be given for all members present and/or voting.

To be completed by Academic Affairs      Date of Implementation: \_\_\_\_\_

\_\_\_\_\_  
President (Date Approved)

\_\_\_\_\_  
Board of Trustees (Date Approved)

\_\_\_\_\_  
Academic Officers of MI (Date Approved)

1. Proposal Summary: (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights)  
 This proposal is for the development of a new one-credit course that will become part of the CARE suite of courses (currently 102, 201, 202, an 203). The course is being designed as a one-credit class specifically designed to address the needs of adults seeking career attainment or career change. The course will focus on small group discussion, career theory and soft skills lectures, in-class exercises, role-playing, out-of-class assignments. The course will help students discover and understand their personal attributes, traits, and tendencies, and how they align to career opportunities. The rationale behind the creation of this course has come from community partners who have offered the CARE 102 three-credit class to adult students. We have found that the CARE 102 course is too lengthy for many of them to complete and have realized that a scaled down version of this course with a greater focus on soft skills and values will fulfill their needs to a greater capacity. The course was run as an experimental (CARE 190) course during the spring of 2017 with great success. Furthermore, we see the potential for this course to be part of the two-generation pilot project with Grand Rapids Public Schools. This course will only be offered to adult learners through collaboration with community partners. Therefore, changes to the check sheet will not be required. Course Outcomes: 1. Students will explore their personal values, interests, and determine what is important to them in a career through self-assessments. 2. Students will learn the importance of setting goals by developing and monitoring at least two SMART Goals focused on short-term career oriented accomplishments. 3. Students will learn the value of having soft skills and a strong work ethic through reflective journaling.

2. Summary of Curricular Action (Check all that apply to this proposal)

- Degree       Major       Minor       Concentration       Certificate       Course  
 New       Modification       Deletion

Name of Degree, Major, etc.: Career Exploration

3. Summary of All Course Action Required:

A. Newly Created Courses to be Added to the Catalog

Prefix	Number	Title
CARE	100	Career Planning

B. Courses to be Deleted from FSU Catalog

Prefix	Number	Title
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

C. Existing Courses to be Modified

Prefix	Number	Title
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

D. Addition of existing FSU courses to program

Prefix	Number	Title
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

E. Removal of existing FSU courses from program

Prefix	Number	Title
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

4. Summary of All Consultations

Form Sent (B/B-UGPC or C)	Date Sent	Responding Department	Date Received & By Whom
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

5. Will External Accreditation be sought? (For new programs or certificates only)

- Yes       No

If yes, name the organization involved with accreditation for this program. [Click here to enter text.](#)

6. Is a PCAF required?  Yes     No    Is the PCAF approved?  Yes  No (If yes, supply link on Academic Affairs website where PCAF is posted. )

7. Program Checksheets affected by this proposal (Check all that apply to this proposal) REQUIRED

- Add Course     Delete Course     Modify Course     Change Prerequisite     Move from required to elective

- Move from elective to required       Change Outcomes and Assessment Plan       Change Credit hours

8. List all Checksheets affected by this proposal:

College

Retention and Student Success

Department

Developmental Curriculum

Program

Career Exploration



Original - I have highlighted the areas that have been changed/updated.

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201801

NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.

**II. COURSE IDENTIFICATION: CARE, 100, Career Exploration**

Course Prefix, Course Number – Course Title

If deleting a course STOP HERE.

For modification, complete all fields that will be changed.

If creating a course, complete all relevant fields.

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
						CARE	100	15	x		
Title: Click here to enter text.						Title: Career Exploration					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
1		NA		NA		1		NA		NA	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Click here to enter text.						Career Exploration (CARE) 100 explores the career search process and the associated values and skills of successful employment and career development.					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Click here to enter text.						<ol style="list-style-type: none"> <li>1. Students will explore their personal values and interests to determine what is important to them in a career through self-assessments.</li> <li>2. Students will learn the importance of setting goals by developing and monitoring at least two SMART Goals focused on short-term career oriented accomplishments.</li> <li>3. Students will learn the value of having soft skills and a strong work ethic through reflective journaling.</li> </ol>					
Course Outline including Time Allocation						Course Outline including Time Allocation					
Click here to enter text.						Due to the fact that this course will be offered through many community partnerships, the allocation of time will depend on the institution running the course (i.e., 15 – 1 hour classes, 6 – 2.5 hour classes, etc.). However, the course outline will be as follows: 1 hour – Difference between a career and a job					

	2 hours – Attributes of being successful 2 hours – Values 2 hours - SMART Goals 6 hours - Career Soft Skills 2 hours - Career Assessments,
--	--

- A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:
- Practicum
  - Independent Study
- B. College Code: UN G (RSS)
- C. Department Code: DPCU
- D. Credit Hours:
- Variable
  - Fixed
- E. Minimum Credit Hours: 1
- F. Maximum Credit Hours: 1
- G. Hours may be repeated for additional credit:
- No
  - Yes – If yes, max times repeated: [Click here to enter text.](#) **OR** max credits awarded: [Click here to enter text.](#)
- H. Levels:
- Undergraduate
  - Graduate
  - Professional
- I. Grade Method:
- Standard Letter Grading
  - Credit/No Credit
- J. Does the proposed course replace an equivalent course?
- No
  - Yes – If yes, enter equivalent course: [Click here to enter text.](#)  
*Course Prefix, Number – Course Title*
- K. Term(s) Offered: Fall, Spring, Sumemr
- L. Max Section Enrollment:
- Lecture: 24
- Lab: NA

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

Original - change(s) have been highlighted

## CURRICULUM PROPOSAL SUMMARY AND ROUTING FORM

Proposal Title: Creating new CARE 100 course

Initiating Individual: Dave McCall

Initiating Department or Unit: Developmental Curriculum (RSS)

Contact Person's Name: Dave McCall

Email: davidmccall@ferris.edu

Phone: 591-2842

<b>NOTE: ALL required forms must be completed and included BEFORE submission of the proposal to the University Curriculum Committee.</b>	<b>FORM</b> (checkboxes indicate typically required forms specific to the curricular action)						
	PCAF Link	A	B-UND B-GRA	C	D	EF	FIN
PROPOSAL GROUP: See Table B-7 in the UCC Manual for description.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I-A: New Degree, major, concentration, minor, or redirection of a current offering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I-B: Deletion of a degree, major, concentration, or minor		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
II-A: New Course, modification of a course, deletion of a course Check here if deleting a course		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	
II-B: Minor Curriculum Clean-up		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III: Certificate ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit <input type="checkbox"/> New Certificate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Off Campus: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
IV: Non-degree Offering : Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
	PLEASE PRINT and SIGN YOUR NAME	DATE	VOTE/ACTION * Number Count				
Program Representative **	Dave McCall		<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain				
Department/School/Faculty Representative Vote **	Dave McCall Kristin Conley Monic Frees		<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain				
Department/School Administrator	Deedee Stakley		<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain				
College Curriculum Committee/Faculty	Dave McCall Kristin Conley Monic Frees		<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain				
UCC Representative	N/A		<input type="checkbox"/> Support <input type="checkbox"/> Hold <input type="checkbox"/> Not Support				
Dean	Deedee Stakley		<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support				
University Curriculum Committee **			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain				
Senate **			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain				
Academic Affairs			<input type="checkbox"/> Support <input type="checkbox"/> Hold <input type="checkbox"/> Not Support				

\* Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

\*\* Number Count must be given for all members present and/or voting.

To be completed by Academic Affairs                      Date of Implementation: \_\_\_\_\_

\_\_\_\_\_  
President (Date Approved)

\_\_\_\_\_  
Board of Trustees (Date Approved)

\_\_\_\_\_  
Academic Officers of MI (Date Approved)

1. Proposal Summary: (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights)  
This proposal is for the creation of a new course (CARE 100). We ran an experimental course during spring 2017 (CARE 190), and now want to finalize the course and for future offerings. The CARE 100 course is a scaled down version of our CARE 102 course (with slightly different focus) and will mainly be offered to our community partners through the Office of Transfer and Secondary School Partnerships.

2. Summary of Curricular Action (Check all that apply to this proposal)

Degree       Major       Minor       Concentration       Certificate       Course  
 New       Modification       Deletion

Name of Degree, Major, etc.: [Click here to enter text.](#)

3. Summary of All Course Action Required:

A. Newly Created Courses to be Added to the Catalog

Prefix CARE	Number 100	Title Career Exploration
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

B. Courses to be Deleted from FSU Catalog

Prefix	Number	Title
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

C. Existing Courses to be Modified

Prefix	Number	Title
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

D. Addition of existing FSU courses to program

Prefix	Number	Title
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

E. Removal of existing FSU courses from program

Prefix	Number	Title
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

4. Summary of All Consultations

Form Sent (B/B-UGPC or C)	Date Sent	Responding Department	Date Received & By Whom
Form C	5/29/17	FLITE	<a href="#">Click here to enter text.</a>

5. Will External Accreditation be sought? (For new programs or certificates only)

Yes       No

If yes, name the organization involved with accreditation for this program. [Click here to enter text.](#)

6. Is a PCAF required?  Yes     No    Is the PCAF approved?  Yes  No (If yes, supply link on Academic Affairs website where PCAF is posted. )

7. Program Checksheets affected by this proposal (Check all that apply to this proposal) REQUIRED

Add Course     Delete Course     Modify Course     Change Prerequisite     Move from required to elective  
 Move from elective to required     Change Outcomes and Assessment Plan     Change Credit hours

8. List all Checksheets affected by this proposal:

College  
RSS

Department  
Developmental Curriculum

Program  
Career Exploration

**CURRICULUM PROPOSAL SUMMARY AND ROUTING FORM**

Proposal Title: Clean-up AAS RESP degree

Initiating Individual: M. Sue Waters

Initiating Department or Unit: CRHA

Contact Person's Name: M. Sue Waters

Email: margaretwaters@ferris.edu Phone: 231-591-3186

NOTE: ALL required forms must be completed and included BEFORE submission of the proposal to the University Curriculum Committee.	FORM (checkboxes indicate typically required forms specific to the curricular action)						
	PCAF Link	A	B-UND B-GRA	C	D	EF	FIN
PROPOSAL GROUP: See Table B-7 in the UCC Manual for description.							
I-A: New Degree, major, concentration, minor, or redirection of a current offering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I-B: Deletion of a degree, major, concentration, or minor		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
II-A: New Course, modification of a course, deletion of a course Check here if deleting a course		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
II-B: Minor Curriculum Clean-up		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III: Certificate ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit <input type="checkbox"/> New Certificate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Off Campus: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
IV: Non-degree Offering : Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
	PLEASE PRINT and SIGN YOUR NAME	DATE	VOTE/ACTION * Number Count				
Program Representative **	Margaret Sue Waters <i>Sue Waters</i>	9/15/17	<input type="checkbox"/> _1_ Support <input type="checkbox"/> __ Support with Concerns <input type="checkbox"/> __ Not Support <input type="checkbox"/> __ Abstain				
Department/School/Faculty Representative Vote **	Emily Zyla <i>Emily Zyla</i>	9/20/17	<input type="checkbox"/> _2_ Support <input type="checkbox"/> __ Support with Concerns <input type="checkbox"/> __ Not Support <input type="checkbox"/> __ Abstain				
Department/School Administrator	Greg Zimmerman <i>Greg Zimmerman</i>	9/20/17	<input type="checkbox"/> _1_ Support <input type="checkbox"/> __ Support with Concerns <input type="checkbox"/> __ Not Support <input type="checkbox"/> __ Abstain				
College Curriculum Committee/Faculty	Emily Zyla <i>Emily Zyla</i>	9/26/17	<input checked="" type="checkbox"/> 6 Support <input type="checkbox"/> 0 Support with Concerns <input type="checkbox"/> 0 Not Support <input type="checkbox"/> 0 Abstain				
UCC Representative	<i>Emily Zyla</i>	9/26/17	<input checked="" type="checkbox"/> Support <input type="checkbox"/> __ Hold <input type="checkbox"/> __ Not Support				
Dean	Matthew Adeyanju <i>Matthew Adeyanju</i>	9/29/17	<input checked="" type="checkbox"/> Support <input type="checkbox"/> __ Support with Concerns <input type="checkbox"/> __ Not Support				
University Curriculum Committee **	<i>Russell A. Leonardson</i> RUSSELL A. LEONARDSON	10/5/17	<input checked="" type="checkbox"/> 7 Support <input type="checkbox"/> 0 Support with Concerns <input type="checkbox"/> 0 Not Support <input type="checkbox"/> 0 Abstain				
Senate **	<i>Char Bar</i>	10/11/17	<input type="checkbox"/> __ Support <input type="checkbox"/> __ Support with Concerns <input type="checkbox"/> __ Not Support <input type="checkbox"/> __ Abstain				
Academic Affairs			<input type="checkbox"/> __ Support <input type="checkbox"/> __ Hold <input type="checkbox"/> __ Not Support				

\* Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

\*\* Number Count must be given for all members present and/or voting.

To be completed by Academic Affairs

Date of Implementation: \_\_\_ Spring 2018 \_\_\_

\_\_\_\_\_  
President (Date Approved)

\_\_\_\_\_  
Board of Trustees (Date Approved)

\_\_\_\_\_  
Academic Officers of MI (Date Approved)

1. Proposal Summary: (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights)  
Program clean-up. RESP 220 had 2 credits on the Form E proposal, while the checksheet (Form D) showed it as 3 credits. The intention for the course was to be 3 credits. This does not change the number of total credits for the degree being it was already counted as 3 credits. Just need to change Form E/F to 3 credits.

2. Summary of Curricular Action (Check all that apply to this proposal)

Degree       Major       Minor       Concentration       Certificate       Course  
 New       Modification       Deletion

Name of Degree, Major, etc.: RESP 220

3. Summary of All Course Action Required:

A. Newly Created Courses to be Added to the Catalog

Prefix	Number	Title
Click here to enter text.	Click here to enter text.	Click here to enter text.

B. Courses to be Deleted from FSU Catalog

Prefix	Number	Title
Click here to enter text.	Click here to enter text.	Click here to enter text.

C. Existing Courses to be Modified

Prefix	Number	Title
RESP	220	Adult Mechanical Ventilation

D. Addition of existing FSU courses to program

Prefix	Number	Title
Click here to enter text.	Click here to enter text.	Click here to enter text.

E. Removal of existing FSU courses from program

Prefix	Number	Title
Click here to enter text.	Click here to enter text.	Click here to enter text.

4. Summary of All Consultations

Form Sent (B/B-UGPC or C)	Date Sent	Responding Department	Date Received & By Whom
Not necessary – only affects RESP program	Click here to enter text.		Click here to enter text.

5. Will External Accreditation be sought? (For new programs or certificates only)

Yes       No

If yes, name the organization involved with accreditation for this program. Commission on Accreditation for Respiratory Care

6. Is a PCAF required?  Yes       No      Is the PCAF approved?  Yes       No (If yes, supply link on Academic Affairs website where PCAF is posted. )

7. Program Checksheets affected by this proposal (Check all that apply to this proposal) **REQUIRED**

Add Course       Delete Course       Modify Course       Change Prerequisite       Move from required to elective  
 Move from elective to required       Change Outcomes and Assessment Plan       Change Credit hours

8. List all Checksheets affected by this proposal:

College	Department	Program
College of Health Professions	CRHA	Respiratory Care Program - AAS

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

Desired Term Effective Date (6-digit code): 201801

NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.

**II. COURSE IDENTIFICATION: RESP 220 Adult Mechanical Ventilation**

Course Prefix, Course Number – Course Title

If deleting a course STOP HERE.

For modification, complete all fields that will be changed.

If creating a course, complete all relevant fields.

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
RESP	220		2			RESP	220		3		
Title: Adult Mechanical Ventilation						Title: Click here to enter text.					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
2						3					
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Click here to enter text.						Click here to enter text.					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Click here to enter text.						Click here to enter text.					
Course Outline including Time Allocation						Course Outline including Time Allocation					
Click here to enter text.						<ol style="list-style-type: none"> <li>1. Principles of mechanical ventilation. 4 hours</li> <li>2. Ventilator circuits, the use of humidification, and check-out procedure. 2 hours</li> <li>3. In-line medication delivery (SVN, vibrating mesh, MDI). 2 hours</li> <li>4. Modes of ventilation. 4 hours</li> <li>5. Initiating ventilator support. 3 hours</li> <li>6. Initial ventilator settings in CMV. 2 hours</li> <li>7. Effects and complications of mechanical ventilation. 4 hours</li> <li>8. Changing modes of ventilation. 4 hours</li> <li>9. CMV, SIMV with PS, and PSV. 2 hours</li> <li>10. Weaning from mechanical ventilation and end of life management. 2 hours</li> <li>11. Initial ventilator settings in SIMV with PS. 2 hours</li> <li>12. Patient-ventilator system monitoring. 4 hours</li> <li>13. Recruitment techniques. 2 hours</li> <li>14. Advanced ventilator graphics. 4 hours</li> <li>15. New modes of ventilation. 4 hours</li> </ol>					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: CHP ▼

C. Department Code: RESP ▼

D. Credit Hours:



Variable

Fixed

E. Minimum Credit Hours: 3

F. Maximum Credit Hours: 3

G. Hours may be repeated for additional credit:

No

Yes – If yes, max times repeated: Click here to enter text. **OR** max credits awarded: Click here to enter text.

H. Levels:

Undergraduate

Graduate

Professional

I. Grade Method:

Standard Letter Grading

Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course: Click here to enter text.

*Course Prefix, Number – Course Title*

K. Term(s) Offered: Fall and Spring

L. Max Section Enrollment:

Lecture: 24

Lab: Click here to enter text.

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**  
 Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**  
Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_  
Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**CURRICULUM PROPOSAL SUMMARY AND ROUTING FORM**

Proposal Title: CAS Honors Course Cleanup

Initiating Individual: Mark Thomson

Initiating Department or Unit: College of Arts and Sciences

Contact Person's Name: Mark Thomson

Email: MarkThomson@ferris.edu

Phone: 231-591-5895

NOTE: ALL required forms must be completed and included BEFORE submission of the proposal to the University Curriculum Committee.		FORM (checkboxes indicate typically required forms specific to the curricular action)					
	<a href="#">PCAF Link</a>	A	B-UND B-GRA	C	D	EF	FIN
PROPOSAL GROUP: See Table B-7 in the UCC Manual for description.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I-A: New Degree, major, concentration, minor, or redirection of a current offering		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I-B: Deletion of a degree, major, concentration, or minor		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II-A: New Course, modification of a course, deletion of a course Check here if deleting a course		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II-B: Minor Curriculum Clean-up		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III: Certificate ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit <input type="checkbox"/> New Certificate)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Off Campus: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Non-degree Offering : Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	PLEASE PRINT and SIGN YOUR NAME	DATE	VOTE/ACTION * Number Count				
Program Representative **	 Mark Thomson	9/13/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
Department/School/Faculty Representative Vote **	 Mark Thomson	9/13/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
Department/School Administrator	 Joseph Lipari	9/14/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
College Curriculum Committee/Faculty	 Mark Thomson	9/28/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	6
UCC Representative	 Katherine Harris	10/2/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Hold	<input type="checkbox"/> Not Support		
Dean	 Joseph Lipari	10/2/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support		
University Curriculum Committee **	 RUSS LEONARD	10/12/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	6
Senate **			<input type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
Academic Affairs			<input type="checkbox"/> Support	<input type="checkbox"/> Hold	<input type="checkbox"/> Not Support		

\* Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

\*\* Number Count must be given for all members present and/or voting.

To be completed by Academic Affairs

Date of Implementation: \_\_\_\_\_

\_\_\_\_\_  
President (Date Approved)

\_\_\_\_\_  
Board of Trustees (Date Approved)

\_\_\_\_\_  
Academic Officers of MI (Date Approved)

1. Proposal Summary: (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights) Administration has requested a change in the way that Honors courses are listed in Banner and in the University Catalog. As a result, the “H-prefixed” discipline codes and the courses that use them need to be removed. The removal of such courses that reside in the College of Arts and Sciences is proposed here as a complete set by Mark Thomson, Chair of the College of Arts and Sciences College Curriculum Committee. This is being done for efficiency with the expectation that faculty in individual programs within the College of Arts and Sciences will cooperate with the Honors Program to prepare and submit proposals for replacement courses as soon as guidelines or recommendations are available.

2. Summary of Curricular Action (Check all that apply to this proposal)

- Degree       Major       Minor       Concentration       Certificate       Course  
 New       Modification       Deletion

Name of Degree, Major, etc.: [Click here to enter text.](#)

3. Summary of All Course Action Required:

A. Newly Created Courses to be Added to the Catalog

Prefix	Number	Title
<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>	<a href="#">Click here to enter text.</a>

B. Courses to be Deleted from FSU Catalog

Prefix	Number	Title
ANHH	371	Medical Anthropology Honors
ANHH	390	Special Topics in Anthropology
COMH	121	Public Speaking Honors
FRNH	280	Literature Fren World Honors
FRNH	290	Spec Topics in Lit Fren Honrs
HISH	258	Greece and Rome – Honors
HISH	315	Civil Rights Movement – Honors
HISH	330	The Turbulent 1960’s – Honors
HISH	371	East Asia in the 20th Century – Honors
HUMH	202	African-Amer Cult Expre Honors
HUMH	290	Special Topics in HUMH Honors
HUMH	327	Mythology Honors
HUMH	390	Special Topics in HUMH
LITH	202	Black Literature Honors
LITH	203	Intro African Lit Honors
LITH	233	Science Fiction Honors
LITH	241	Intro to World Shrt Fiction Hnr
LITH	280	Intro American Folklore Honors
LITH	290	Special Topics in LITH
LITH	297	Special Studies in LITH
LITH	323	Shakespeare for Honors
LITH	330	Contemporary Literature Honors
LITH	371	Topics in Women’s Lit Honors
LITH	380	World Folk Literature Honors
PHIH	216	Honors Intro to Ethics
PHIH	290	Special Topics in PHIH Honors
PHIH	390	Special Topics in PHIH
PSYH	325	Social Psychology Honors
PSYH	331	Psychology of Personality Hnrs
PSYH	390	Special Topics in PSYH Honors
RELH	325	Eastern Religions Honors
SOCH	340	Minority Groups America Honors
SOCH	341	Community Studies Honors
TH	215	Honors Introduction to Theatre

C. Existing Courses to be Modified

Prefix	Number	Title
--------	--------	-------

Click here to enter text. Click here to enter text.

Click here to enter text.

D. Addition of existing FSU courses to program

Prefix

Number

Title

Click here to enter text. Click here to enter text.

Click here to enter text.

E. Removal of existing FSU courses from program

Prefix

Number

Title

Click here to enter text. Click here to enter text.

Click here to enter text.

4. Summary of All Consultations

Form Sent (B/B-UGPC or C)	Date Sent	Responding Department	Date Received & By Whom
FORM B	9/13/2017	English, Literature, and World Languages	Click here to enter text.
FORM B	9/13/2017	Honors Program	Click here to enter text.
FORM B	9/13/2017	Humanities	Click here to enter text.
FORM B	9/13/2017	Social and Behavioral Sciences	Click here to enter text.

5. Will External Accreditation be sought? (For new programs or certificates only)

Yes

No

If yes, name the organization involved with accreditation for this program. Click here to enter text.

6. Is a PCAF required?  Yes  No Is the PCAF approved?  Yes  No (If yes, supply link on Academic Affairs website where PCAF is posted. )

7. Program Checksheets affected by this proposal (Check all that apply to this proposal) REQUIRED

- Add Course   
 Delete Course   
 Modify Course   
 Change Prerequisite   
 Move from required to elective  
 Move from elective to required   
 Change Outcomes and Assessment Plan   
 Change Credit hours

8. List all Checksheets affected by this proposal:

College

Department

Program

Click here to enter text.

Click here to enter text.

Click here to enter text.

## FORM B - Undergraduate

Effective Fall 2016

To be completed by each department affected by the proposed change, addition, or deletion. Potential duplication of coursework is reason for consultation.

1. This completed form must be forwarded with the proposal to the administrator of the department to be consulted.
2. The department must respond within 10 business days of receipt of this form to insure inclusion in the final proposal. The completed original is returned to the Academic Senate Office to be inserted into the proposal and a copy is returned to the initiator.

The department must acknowledge receipt of this form and the proposal in writing to the initiator.

Failure to respond by 10 business days of receipt of this form is interpreted as support for the proposal.

3. The Proposing Department must address any concerns raised by the consulted department. This response must be in writing and will be included in the proposal following the original consultation form.

RE: Proposal Title: CAS Honors Course Cleanup

Initiator(s): Mark Thomson

Proposal Contact: MarkThomson@ferris.edu Date Sent: 9/13/2017

Department: College of Arts and Sciences Campus Address: ASC 3052  
(Please type)

Based upon department faculty review on (Date) we:

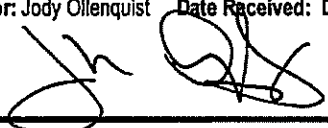
- Support the above proposal.  
 Support the above proposal with the modifications and concerns listed below.  
 Do not support the proposal for the reasons listed below.

Comment regarding the impact this proposal has on current curriculum including prerequisites, scheduling, room assignments, and/or faculty load for your department. Use additional pages, if necessary.

Responding Department: English, Literature, and World Languages

Administrator: Jody Ollenquist Date Received: Date Returned:

Signature:



Received: 9/13/17

Returned: 9/13/17

**FORM B - Undergraduate**  
Effective Fall 2016

To be completed by each department affected by the proposed change, addition, or deletion. Potential duplication of coursework is reason for consultation.

1. This completed form must be forwarded with the proposal to the administrator of the department to be consulted.
2. The department must respond within 10 business days of receipt of this form to insure inclusion in the final proposal. The completed original is returned to the Academic Senate Office to be inserted into the proposal and a copy is returned to the initiator.

The department must acknowledge receipt of this form and the proposal in writing to the initiator.

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3. The Proposing Department must address any concerns raised by the consulted department. This response must be in writing and will be included in the proposal following the original consultation form.

RE: Proposal Title: CAS Honors Course Cleanup

Initiator(s): Mark Thomson

Proposal Contact: MarkThomson@ferris.edu Date Sent: 9/13/2017

Department: College of Arts and Sciences Campus Address: ASC 3052  
(Please type)

Based upon department faculty review on (Date) we:

- Support the above proposal.  
 Support the above proposal with the modifications and concerns listed below.  
 Do not support the proposal for the reasons listed below.

Comment regarding the impact this proposal has on current curriculum including prerequisites, scheduling, room assignments, and/or faculty load for your department. Use additional pages, if necessary.

Responding Department: Honors Program

Administrator: Peter Bradley

Date Received: 9/13/17 Date Returned: 9/13/17

Signature: 

**FORM B - Undergraduate**  
Effective Fall 2016

To be completed by each department affected by the proposed change, addition, or deletion. Potential duplication of coursework is reason for consultation.

1. This completed form must be forwarded with the proposal to the administrator of the department to be consulted.
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3. The Proposing Department must address any concerns raised by the consulted department. This response must be in writing and will be included in the proposal following the original consultation form.

RE: Proposal Title: CAS Honors Course Cleanup

Initiator(s): Mark Thomson

Proposal Contact: MarkThomson@ferris.edu Date Sent: 9/13/2017

Department: College of Arts and Sciences Campus Address: ASC 3052  
(Please type)

Based upon department faculty review on (Date) we:

- Support the above proposal.
- Support the above proposal with the modifications and concerns listed below.
- Do not support the proposal for the reasons listed below.

Comment regarding the impact this proposal has on current curriculum including prerequisites, scheduling, room assignments, and/or faculty load for your department. Use additional pages, if necessary.

*Concerns about how "Honors" courses will be accessible (or not) to non-honors students, and how professors' responsibilities will be impacted if they need to teach Honors + non-honors students in some sections, and*

Responding Department: Humanities

*how honors courses will be indicated on transcripts, even if its for a non-honors student*

Administrator: R. Scott Cohen Date Received: Date Returned:

Signature:

*[Handwritten Signature]* 9/29/17

---

**From:** Mark A Thomson  
**Sent:** Wednesday, October 4, 2017 12:11 AM  
**To:** Gayle E Driggers  
**Cc:** Richard Scott S Cohen; John Scott S Gray; Sylvia H Maixner  
**Subject:** Response to Humanities Consultation

Gayle,

Please attach this to the Curriculum Proposal as my response to the Humanities Consultation and their Support with Concerns.

Response to Humanities Department Concerns

How will "Honors" courses be accessible (or not) to non-honors students?

Access for non-honors students is a concern that will need to be addressed as proposals for new/replacement courses are developed. If access is not allowed, this will need to be addressed in the pre-requisites and co-requisites listed in the proposal. If access is allowed, this should be indicated in the course description so that students considering the course can be informed. An additional option would be to co-list paired honors and non-honors courses and have a single instructor teach both courses together. These two courses cannot be the same section, nor can they be different sections of the same course but would need to be two different courses with different outcomes and expectations. Doing this would require modifications to existing workload policies and, as such, would need to be negotiated in the context of the FFA contract and other pertinent policies and be at the discretion of the faculty member involved.

How "Honors" courses will be indicated on transcripts, even for non-honors students?

The new courses that will be proposed and replace those being eliminated in this proposal will each have different course numbers (appended with an H) and different course titles (including the word HONORS) to ensure that they are distinct from the non-honors courses based the same material and content. Transcripts, student records, and MyDegree should continue to specify course discipline codes, numbers, and titles and this will ensure the distinction between versions of the courses for both honors students and for non-honors students choosing to enroll in honors courses, should they elect to do so. The decision to allow non-honors students to select this option will be made on a course-by-course basis as the new/replacement courses are proposed and will be justified therein.



# FORM B - Undergraduate

Effective Fall 2016

To be completed by each department affected by the proposed change, addition, or deletion. Potential duplication of coursework is reason for consultation.

1. This completed form must be forwarded with the proposal to the administrator of the department to be consulted.
2. The department must respond within 10 business days of receipt of this form to insure inclusion in the final proposal. The completed original is returned to the Academic Senate Office to be inserted into the proposal and a copy is returned to the initiator.

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3. The Proposing Department must address any concerns raised by the consulted department. This response must be in writing and will be included in the proposal following the original consultation form.

RE: Proposal Title: CAS Honors Course Cleanup

Initiator(s): Mark Thomson

Proposal Contact: MarkThomson@ferris.edu Date Sent: 9/13/2017

Department: College of Arts and Sciences Campus Address: ASC 3052  
(Please type)

Based upon department faculty review on (Date) we:

- Support the above proposal.  
 Support the above proposal with the modifications and concerns listed below.  
 Do not support the proposal for the reasons listed below.

Comment regarding the impact this proposal has on current curriculum including prerequisites, scheduling, room assignments, and/or faculty load for your department. Use additional pages, if necessary.

Responding Department: Social and Behavioral Sciences

Administrator: Meral Topcu Date Received: 9/14/17 Date Returned:

Signature: 

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** ANHH 371 Medical Anthropology Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

Course Prefix, Number – Course Title

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

*Jess Leach 10/12/17*

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

## Course Information Form *(formerly Form E and Form F)*

### I. ACTION TO BE TAKEN:

CREATE,  MODIFY, OR  DELETE

Desired Term Effective Date (6-digit code): 201808

NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.

### II. COURSE IDENTIFICATION: ANHH 390 Special Topics in Anthropology

*Course Prefix, Course Number – Course Title*

If deleting a course STOP HERE.

For modification, complete all fields that will be changed.

If creating a course, complete all relevant fields.

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Cross Land N 12/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** COMH 121 Public Speaking Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

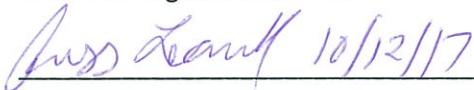
Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

 10/12/17

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** FRNH 280 Literature Fren World Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit



J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

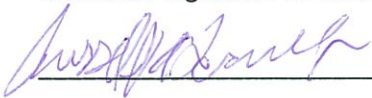
Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

 10/12/17

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** FRNH 290 Spec Topics in Lit Fren Honrs

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Rowland 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** HISH 258 Greece and Rome – Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Leavelle 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** HISH 315 Civil Rights Movement – Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

*[Handwritten Signature]* 10/12/17

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** HISH 330 The Turbulent 1960's – Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit



J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

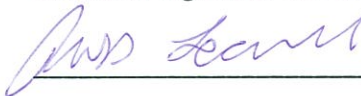
Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

 10/12/17

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** HISH 371 East Asia in the 20th Century – Honors  
*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

*Jessie Lamm 10/12/17*

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** HUMH 202 African-Amer Cult Expre Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Leavelle 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** HUMH 290 Special Topics in HUMH Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

 10/12/17

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** HUMH 327 Mythology Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit



J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Leard 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** HUMH 390 Special Topics in HUMH

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

Course Prefix, Number – Course Title

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

*Justin [Signature]* 10/12/17

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

## Course Information Form *(formerly Form E and Form F)*

### I. ACTION TO BE TAKEN:

CREATE,  MODIFY, OR  DELETE

Desired Term Effective Date (6-digit code): 201808

NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.

### II. COURSE IDENTIFICATION: LITH 202 Black Literature Honors

*Course Prefix, Course Number – Course Title*

If deleting a course STOP HERE.

For modification, complete all fields that will be changed.

If creating a course, complete all relevant fields.

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

*Jessie Leavelle 10/12/17*

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 203 Intro African Lit Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Kamm 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 233 Science Fiction Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit



J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Leavelle 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 241 Intro to World Shrt Fiction Hnr

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

*Jess Leavitt 10/12/17*

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 280 Intro American Folklore Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

Course Prefix, Number – Course Title

K. Term(s) Offered:

L. Max Section Enrollment:

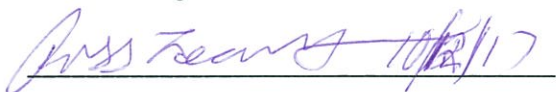
Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

 \_\_\_\_\_

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 290 Special Topics in LITH

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

Course Prefix, Number – Course Title

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Guss Seaman 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 297 Special Studies in LITH

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit



J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Leavelle 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 323 Shakespeare for Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

 10/12/17

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 330 Contemporary Literature Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

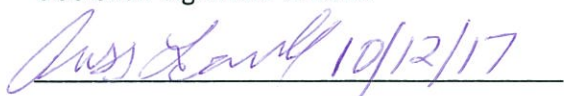
Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

 10/12/17

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 371 Topics in Women's Lit Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – *If yes, enter equivalent course:*

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Leavelle 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** LITH 380 World Folk Literature Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit



J. Does the proposed course replace an equivalent course?

No

Yes – *If yes, enter equivalent course:*

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

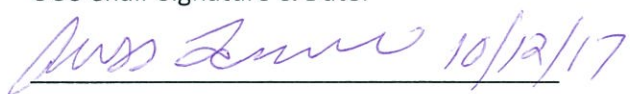
Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

 10/12/17

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** PHIH 216 Honors Intro to Ethics

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – *If yes, enter equivalent course:*

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*James Leonard 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** PHIH 290 Special Topics in PHIH Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

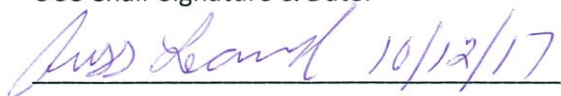
Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

 10/12/17

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCARSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** PHIH 390 Special Topics in PHIH

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – *If yes, enter equivalent course:*

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Leavelle 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** PSYH 325 Social Psychology Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit



J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

Course Prefix, Number – Course Title

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Leavelle 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** PSYH 331 Psychology of Personality Hrs

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Jess Leamy 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** PSYH 390 Special Topics in PSYH Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – *If yes, enter equivalent course:*

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*Juss Leant 10/12/17*

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** RELH 325 Eastern Religions Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – *If yes, enter equivalent course:*

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

*Jess Leavelle 10/12/17*

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** SOCH 340 Minority Groups America Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit



J. Does the proposed course replace an equivalent course?

No

Yes – *If yes, enter equivalent course:*

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

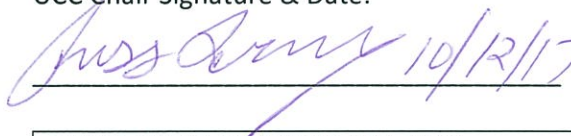
Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

 10/12/17

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** SOCH 341 Community Studies Honors

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – *If yes, enter equivalent course:*

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

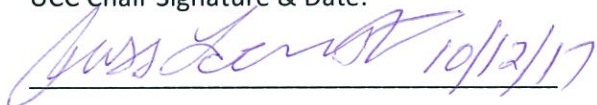
Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

 10/12/17

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

**Desired Term Effective Date (6-digit code):** 201808

*NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.*

**II. COURSE IDENTIFICATION:** TH 215 Honors Introduction to Theatre

*Course Prefix, Course Number – Course Title*

**If deleting a course STOP HERE.**

**For modification, complete all fields that will be changed.**

**If creating a course, complete all relevant fields.**

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
Title:						Title:					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Course Outline including Time Allocation						Course Outline including Time Allocation					

A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:

- Practicum
- Independent Study

B. College Code: ▼

C. Department Code:

D. Credit Hours:

- Variable
- Fixed

E. Minimum Credit Hours:

F. Maximum Credit Hours:

G. Hours may be repeated for additional credit:

- No
- Yes – If yes, max times repeated: **OR** max credits awarded:

H. Levels:

- Undergraduate
- Graduate
- Professional

I. Grade Method:

- Standard Letter Grading
- Credit/No Credit

J. Does the proposed course replace an equivalent course?

No

Yes – If yes, enter equivalent course:

*Course Prefix, Number – Course Title*

K. Term(s) Offered:

L. Max Section Enrollment:

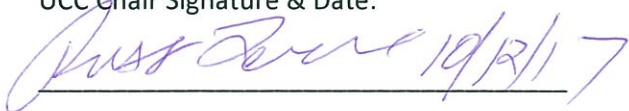
Lecture:

Lab:

**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**

Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

  
\_\_\_\_\_

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**CURRICULUM PROPOSAL SUMMARY AND ROUTING FORM**

Proposal Title: Philosophy minor curriculum clean-up

Initiating Individual: John Scott Gray

Initiating Department or Unit: Humanities Dept.

Contact Person's Name: John Scott Gray

Email: grayj14@ferris.edu

Phone: 231-591-3515

NOTE: ALL required forms must be completed and included BEFORE submission of the proposal to the University Curriculum Committee.	FORM (checkboxes indicate typically required forms specific to the curricular action)						
	PCAF Link	A	B-UND B-GRA	C	D	EF	FIN
PROPOSAL GROUP: See Table B-7 in the UCC Manual for description.							
I-A: New Degree, major, concentration, minor, or redirection of a current offering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I-B: Deletion of a degree, major, concentration, or minor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II-A: New Course, modification of a course, deletion of a course Check here if deleting a course	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II-B: Minor Curriculum Clean-up	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III: Certificate ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit <input type="checkbox"/> New Certificate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Off Campus: Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV: Non-degree Offering : Other site location ( <input type="checkbox"/> College Credit <input type="checkbox"/> Non-credit)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program Representative **	PLEASE PRINT and SIGN YOUR NAME	DATE	VOTE/ACTION * Number Count				
	Rachel Faulk Rachel Foulk	8/7/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
Department/School/Faculty Representative Vote **	John Scott Gray	8-28-17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
Department/School Administrator	Rachel Scott Cohen	8/28/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
College Curriculum Committee/Faculty	Mark Thomson	9/19/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
UCC Representative	Katherine B. Harris	9/20/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Hold	<input type="checkbox"/> Not Support		
Dean	Joseph Lipari	10/4/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support		
University Curriculum Committee **	Russ (EONAES)	10/27/17	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
Senate **			<input type="checkbox"/> Support	<input type="checkbox"/> Support with Concerns	<input type="checkbox"/> Not Support	<input type="checkbox"/> Abstain	
Academic Affairs			<input type="checkbox"/> Support	<input type="checkbox"/> Hold	<input type="checkbox"/> Not Support		

\* Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

\*\* Number Count must be given for all members present and/or voting.

To be completed by Academic Affairs Date of Implementation: \_\_\_\_\_

\_\_\_\_\_  
President (Date Approved)

\_\_\_\_\_  
Board of Trustees (Date Approved)

\_\_\_\_\_  
Academic Officers of MI (Date Approved)

1. Proposal Summary: (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights)  
 This clean-up seeks to add several electives to the current Philosophy Minor check sheet (including out Special Topics course, Phil 350 and Applied Ethics, Phil 316) as well as create two new classes for the minor (Phil 120: The Good Life and Relg 371: Buddhism). The minor has historically been strong with number of minors at any time ranging from 20-40. Given recent focus group input that has asked for a wider range of courses, we believe these additional options will help students find courses that better fit their interests while also cutting down on course substitutions. The Buddhism course is in line with other various general education courses that serve both the general population and this minor in particular. The Good Life course fills a fundamental gap in our program, for no current philosophy course highlights the “therapeutic” focus present in the history of philosophy. As Socrates argued long ago, “the unexamined life is not worth living,” and this new course taps into this valuable but often overlooked question in philosophy: how should we live our lives? This question goes directly to the heart of one of the goals of Ferris General Education: “It assists students in gaining a better understanding of themselves. It also widens the horizons of their experience by offering them a better understanding and appreciation of some of the best of human achievement.” In addition to appealing to general education students, this new course should prove interesting to many of the Philosophy Minors, many of whom major in Psychology or Social Work. For example, one of the leading counseling techniques (Cognitive Behavioral Therapy) traces its roots to Stoic philosophy. All students who take the course will see the value of philosophy for contemporary lives (which too often are full of anxiety, depression, and debilitating stress).

2. Summary of Curricular Action (Check all that apply to this proposal)

- Degree       Major       Minor       Concentration       Certificate       Course  
 New       Modification       Deletion

Name of Degree, Major, etc.: Philosophy

3. Summary of All Course Action Required:

A. Newly Created Courses to be Added to the Catalog

Prefix	Number	Title
Phil	120	The Good Life
Relg	371	Buddhism

B. Courses to be Deleted from FSU Catalog

Prefix	Number	Title
Click here to enter text.	Click here to enter text.	Click here to enter text.

C. Existing Courses to be Modified

Prefix	Number	Title
Click here to enter text.	Click here to enter text	Click here to enter text

D. Addition of existing FSU courses to program

Prefix	Number	Title
Click here to enter text.	Click here to enter text.	Click here to enter text.
Phil	316	Applied Ethics
Phil	350	Special Topics in Philosophy

E. Removal of existing FSU courses from program

Prefix	Number	Title
Click here to enter text	Click here to enter text.	Click here to enter text.

4. Summary of All Consultations

Form Sent (B/B-UGPC or C)	Date Sent	Responding Department	Date Received & By Whom
Form C	8-7-2017 <a href="#">Click here to enter text</a>	<a href="#">Click here to enter text</a>	<a href="#">Click here to enter text.</a>

5. Will External Accreditation be sought? (For new programs or certificates only)

- Yes       No

If yes, name the organization involved with accreditation for this program. [Click here to enter text.](#)

6. Is a PCAF required?  Yes  No Is the PCAF approved?  Yes  No (If yes, supply link on Academic Affairs website where PCAF is posted. )

7. Program Checksheets affected by this proposal (Check all that apply to this proposal) **REQUIRED**

- Add Course     Delete Course     Modify Course     Change Prerequisite     Move from required to elective  
 Move from elective to required     Change Outcomes and Assessment Plan     Change Credit hours

8. List all Checksheets affected by this proposal:

College  
AS

Department  
Humanities Dept.

Program  
Philosophy Minor



## FLITE SERVICES CONSULTATION FORM

To be completed by the liaison librarian and approved by the Dean of FLITE. FLITE must return the original form to the Academic Senate office to be inserted in the proposal and a copy to the initiator. FLITE must respond within 10 business days of receipt of this form to insure that the form is included in the final proposal.

Failure to respond by 10 business days of receipt of this form is interpreted as support for the proposal.

**RE: Proposal Title:** Philosophy minor curriculum clean-up

Projected number of students per year affected by proposed change: 100-150

<b>Initiator(s):</b> John Scott Gray	
<b>Proposal Contact:</b> John Scott Gray	<b>Date Sent:</b> 8-7-2017
<b>Department:</b> Humanities Dept. (Please type)	<b>Campus Address:</b> John Hall 119
<b>Liaison Librarian Signature:</b> Click here to enter text.	<b>Date Received:</b> Click here to enter text.
<b>Dean of FLITE Signature:</b> Click here to enter text.	<b>Date Returned:</b> Click here to enter text.

Based upon our review on (date), FLITE concludes that:

- Library resources to support the proposed curriculum change are currently available.
- Additional Library resources are needed but can be obtained from current funds.
- Support, but significant additional Library funds/resources are required in the amount of \$\_. Click here to enter text..
- Does not support the proposal for reasons listed below.

**Comment regarding the impact this proposal will have on library resources, collection development, or other FLITE programs. Use additional pages if necessary. Click here to enter text.**

## FORM D

Effective Fall 2106

### FORM D GUIDELINES

#### MAJOR, MAJOR WITH CONCENTRATION, MINOR OR CERTIFICATE GUIDELINES

LABEL AS "CURRENT" and "PROPOSED" (if applicable) Highlight the changes on the current and proposed

Because Form D is a summary of the requirements for completing a major, major with concentration, minor or certificate granted by Ferris State University, it is essential that it contains all of the information listed below:

- Checksheet\* ( <http://ferris.edu/HTMLS/administration/academicaffairs/mydegree/dwcontent/index.htm> ) with total credits required; specifying the minimum number of credits earned at FSU.
- General Education requirements including course levels, prerequisites and semester offered if applicable)
- Minimum number of 300 and 400 level courses
- All course prerequisites
- Any special admissions, continuation, or graduation requirements
- Student Learning Outcomes clearly linked to measurable Program Assessment Strategies
  - (See Appendix D Writing Student Learning Outcomes)
- A Term-by-Term plan for completion of the offering

It is recommended that checksheets include information about when required courses are typically offered.

\* Because of the multiple versions of the checksheets, proposal initiators should contact MyDegree Director ([mydegree@ferris.edu](mailto:mydegree@ferris.edu), X-5435) for the checksheets appropriate for their proposal.



# Philosophy (PHIL) - 18 Credits

PHIL-MNR\_2017\_2018

Minor

## CURRENT CHECKSHEET

College of Arts and Sciences

### ADMISSION REQUIREMENTS

#### New Students

- Student must be admitted to the university and pursuing a baccalaureate degree.

#### Transfer Students

- Student must be admitted to the university and pursuing a baccalaureate degree.

Prefix	###	Course Title (Prerequisites shown in parenthesis)	Crs
<b>MINOR REQUIREMENTS – 9 Credits Required</b>			
PHIL	203	Ancient through Medieval (ENGL 150)	3
PHIL	204	Modern Philosophy (ENGL 150)	3
CHOOSE ONE	PHIL 216 PHIL 217	Intro to Ethics (2 <sup>nd</sup> semester standing freshman) Intro to Logic	3
<b>ELECTIVES – 9 Credits Required</b>			
PHIL	115	Introduction to Philosophy	3
PHIL	218	Philosophy of Sex and Love (ENGL 150)	3
PHIL	220	Ethics in Health Care	3
PHIL	305	Feminist & Gender Theory (ENGL 250)	3
PHIL	310	Contemporary Philosophy (ENGL 250)	3
PHIL	315	Political and Social Philosophy (ENGL 150)	3
PHIL	320	Biomedical Ethics (ENGL 150)	3
RELG	215	Comparative Religions	3
RELG	325	Eastern Religions (ENGL 150)	3
RELG	326	Western Religions (ENGL 150)	3

### ADDITIONAL GRADUATION REQUIREMENTS

- Students must maintain a minimum 2.0 GPA in minor courses
- At least 12 credits in the minor must carry PHIL designators
- No more than 50% of the credits in this minor may be transferred from another institution.
- A maximum of 1/3 of the credits, but no more than 7 credits in a minor, may overlap the student's major.
- At least 50% of the credits of the minor must be numbered 200 or higher, with 6 credits 300 or higher
- Students may apply 6 credit hours of overlap between minors
- Minor requirements must be completed prior to or at the time of the awarding of a baccalaureate or higher degree

<b>SECTION A DECLARATION OF MINOR</b>	<b>Signatures</b>		<b>Date</b>
	Student		
	Advisor		
	Department		
<b>SECTION B MINOR COMPLETE</b>	<b>Routing (FOLLOWING COMPLETION OF THE REQUIRED COURSES FOR THE MINOR)</b>		<b>Date</b>
	Department		
	CAS Dean	<input type="checkbox"/> Degree Verified	
	Registrar		



**Philosophy (PHIL) - 18 Credits**  
Minor

PHIL-MNR\_2017\_2018

*NEW/Proposed*  
College of Arts and Sciences

**ADMISSION REQUIREMENTS**

**New Students**

- Student must be admitted to the university and pursuing a baccalaureate degree.

**Transfer Students**

- Student must be admitted to the university and pursuing a baccalaureate degree.

Prefix	###	Course Title (Prerequisites shown in parenthesis)	Crs
<b>MINOR REQUIREMENTS – 9 Credits Required</b>			
PHIL	203	Ancient through Medieval (ENGL 150)	3
PHIL	204	Modern Philosophy (ENGL 150)	3
PHIL	216	Intro to Ethics (2 <sup>nd</sup> semester standing freshman)	3
	OR 217		
<b>ADDITIONAL REQUIREMENTS – 9 Credits Required</b>			
PHIL	115	Introduction to Philosophy	3
PHIL	120	The Good Life	3
PHIL	218	Philosophy of Sex and Love (ENGL 150)	3
PHIL	220	Ethics in Health Care	3
PHIL	305	Feminist & Gender Theory (ENGL 250)	3
PHIL	310	Contemporary Philosophy (ENGL 250)	3
PHIL	315	Political and Social Philosophy (ENGL 150)	3
PHIL	316	Applied Ethics (ENGL 250)	3
PHIL	320	Biomedical Ethics (ENGL 150)	3
PHIL	350	Topics in Philosophy (ENGL 150)	3
RELG	215	Comparative Religions	3
RELG	325	Eastern Religions (ENGL 150)	3
RELG	326	Western Religions (ENGL 150)	3
RELG	371	Buddhism (ENGL 250)	3

**ADDITIONAL GRADUATION REQUIREMENTS**

1. At least 12 credits in the minor must carry PHIL designators
2. At least 50% of the credits of the minor must be numbered 200 or higher, with 6 credits 300 or higher
3. At least 50% of the credits of the minor must be Ferris State University Credits
4. This minor requires a minimum GPA of 2.0 in these courses
5. A maximum of 1/3 of the credits, but no more than 7 credits, in a minor may overlap with the student's major.
6. Students may apply 6 credit hours of overlap between minors
7. Minor requirements must be completed prior to or at the time of the awarding of a baccalaureate or higher degree

**PHILOSOPHY PROGRAM OUTCOMES**

- 1) Interpret the content and evolution of Western philosophy
- 2) Develop philosophical self-reflection as a way of enhancing the quality of their lives and world
- 3) Apply the philosophical method of examination to central issues of our environment, human action and interaction
- 4) Integrate traditional philosophical concepts and methods into sustaining an ethical existence and responsible citizenship
- 5) Critically appraise arguments in a wide variety of forms and topics

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

Desired Term Effective Date (6-digit code): 201801

NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.

**II. COURSE IDENTIFICATION: Relg 371 -- Buddhism**

Course Prefix, Course Number – Course Title

If deleting a course STOP HERE.

For modification, complete all fields that will be changed.

If creating a course, complete all relevant fields.

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
						Relg	371	3	3	0	0
Title: Click here to enter text.						Title: Buddhism					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
						3		Engl 250			
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Click here to enter text.						Buddhism is one of the world's primary religions, originating in India by an individual who became 'awakened' and began teaching about his experience regarding human life. This individual became known as the Buddha. In this course, student will become familiar with the history and cultural contexts of Buddhism both in India and beyond. Students will study the key concepts of the religion and philosophy, including the Four Noble Truths and the Eightfold Path.					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Click here to enter text.						Students will: *Identify the various countries, nations, and cultures associated with Buddhism. *Distinguish the key concepts of Buddhism. *Interpret the importance of Buddhism to world history and culture. *Explain the differences between Buddhism and other world religions, particularly Hinduism. *Analyze the core religious texts associated with Buddhism. These outcomes will be assessed using a combination of exams, journal entrees, research papers and presentations.					
Course Outline including Time Allocation						Course Outline including Time Allocation					
Click here to enter text.						Sample: I. Hinduism and Buddhism – background (one week) II. History and cultures of Buddhism (one week) III. Theravada: History					

	and Culture (three weeks) IV. Mahayana (three weeks) V. Zen and Tibetan (four weeks) VI. Buddhist Sutras (three weeks)
--	--

- A. If not LEC/LAB/SEM, Check box as appropriate [See Definitions in Appendix E]:  
 Practicum  
 Independent Study
- B. College Code: AS
- C. Department Code: HUMN
- D. Credit Hours:  
 Variable  
 Fixed
- E. Minimum Credit Hours: 3
- F. Maximum Credit Hours: 3
- G. Hours may be repeated for additional credit:  
 No  
 Yes – If yes, max times repeated: Click here to enter text. OR max credits awarded: Click here to enter text.
- H. Levels:  
 Undergraduate  
 Graduate  
 Professional
- I. Grade Method:  
 Standard Letter Grading  
 Credit/No Credit
- J. Does the proposed course replace an equivalent course?  
 No  
 Yes – If yes, enter equivalent course: Click here to enter text.
- Course Prefix, Number – Course Title*
- K. Term(s) Offered: Fall Odd
- L. Max Section Enrollment: 25  
Lecture: XXX  
Lab: Click here to enter text.

To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code  
 Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:  10/27/17

Academic Affairs Approval Signature & Date: \_\_\_\_\_

OFFICE OF THE REGISTRAR USE ONLY  
Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_  
Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

**Course Information Form** (formerly Form E and Form F)

**I. ACTION TO BE TAKEN:**

CREATE,  MODIFY, OR  DELETE

Desired Term Effective Date (6-digit code): 201801

NOTE: The first four digits indicate year, the next two digits indicate month in which term begins.

**II. COURSE IDENTIFICATION: Phil 120 – The Good Life**

Course Prefix, Course Number – Course Title

If deleting a course STOP HERE.

For modification, complete all fields that will be changed.

If creating a course, complete all relevant fields.

CURRENT						PROPOSED					
Prefix	Number	Contact Hours	Lecture	Lab	Seminar	Prefix	Number	Contact Hours	Lecture	Lab	Seminar
						Phil	120	3	3	0	0
Title: Click here to enter text.						Title: The Good Life					
Credit Hours		Prerequisites		Co-requisites		Credit Hours		Prerequisites		Co-requisites	
3						3					
Course/Catalog Description (125 words)						Course/Catalog Description (125 words)					
Click here to enter text.						This course in philosophy will explore how traditional philosophical schools have prescribed recipes on how to live "good lives" that are happy, tranquil, meaningful, and stress-free. Typical schools may include Socratic, Stoic, Epicurean, Skeptical, Cynical, Existential, and Cognitive Behavioral. Students will be asked to identify and contrast central features of these different schools, to engage in personal self-exploration, and to apply some of the concepts and techniques to their own lives.					
Course Outcomes and Assessment Plan						Course Outcomes and Assessment Plan					
Click here to enter text.						<p><b>Upon Completion of the Course Students will be able to:</b></p> <ol style="list-style-type: none"> <li>1. Enumerate the core concepts and techniques related to the good life as advanced by the different philosophical schools studied.</li> <li>2. Differentiate the core ideas among the different philosophical schools.</li> <li>3. Appraise the relative strengths and weakness of those core ideas.</li> <li>4. Practice some of the therapeutic techniques recommended by the different philosophies.</li> <li>5. Test the value of these concepts and techniques by applying them to their own lives.</li> <li>6. Formulate a life plan for implementing some of the core ideas and techniques.</li> </ol>					

	<p><b>7. Report the results of their own personal exploration and adaptation of "the good life." Assessment Plan:</b>  <b>Outcome #1-3: Direct measure through quizzes, exams, or other written projects.</b>  <b>Outcome #4: Direct measures via journal and case study analysis.</b>  <b>Outcome #5: Direct measure via journal; indirect measure via exit interview/reflection.</b>  <b>Outcome #6-7: Direct measure through major final project; indirect via exit interview/reflection.</b></p>
<p>Course Outline including Time Allocation</p>	<p>Course Outline including Time Allocation</p>
<p>Click here to enter text.</p>	<p>Sample: 1. Intro to Therapeutic Philosophy and Socratic Philosophy (three weeks)                  2. Stoic Philosophy (three weeks)                  3. Epicurean Philosophy (three weeks)                  4. Skeptic and Cynic Philosophy (two weeks)                  5. Existential Philosophy (three weeks)                  6. Personal Good Life Plans and Exit Interviews (one week)</p>

- A. If not LEC/LAB/SEM, Check box as appropriate *[See Definitions in Appendix E]*:
- Practicum
  - Independent Study
- B. College Code: AS
- C. Department Code: HUMN
- D. Credit Hours:
- Variable
  - Fixed
- E. Minimum Credit Hours: 3
- F. Maximum Credit Hours: 3
- G. Hours may be repeated for additional credit:
- No
  - Yes – If yes, max times repeated: Click here to enter text. **OR** max credits awarded: Click here to enter text.
- H. Levels:
- Undergraduate
  - Graduate
  - Professional
- I. Grade Method:
- Standard Letter Grading
  - Credit/No Credit
- J. Does the proposed course replace an equivalent course?
- No
  - Yes – If yes, enter equivalent course: Click here to enter text.
- Course Prefix, Number – Course Title*
- K. Term(s) Offered: Spring, Summer, Fall
- L. Max Section Enrollment: 35
- Lecture: XXX
- Lab: Click here to enter text.



**To be completed by Academic Affairs Office: Standards & Measures Coding and General Education Code**  
 Basic Skill (BS),  General Education,  Occupational Education, Gen Ed. Codes: \_\_\_\_\_

UCC Chair Signature & Date:

*[Handwritten Signature]* 10/27/17

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**  
Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_  
Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

# GENERAL EDUCATION APPROVAL FORM

**FORM G**  
Effective Fall 2017

Form G plus justification of the General Education designation being sought must be sent to the General Education Coordinator (preferably electronically). The criteria for each designation can be found FSU General Education website: <http://www.ferris.edu/HTMLS/academics/gened/gened.html>

Upon review, the form below will be completed by the **University General Education Committee** for the courses that will meet General Education requirements. The form must be included in the proposal packet.

Course Prefix: PHIL Course Number: 120

Course Title: The Good Life

G. E. Codes Requested: CLTR

G.E. Codes: **COMS**=Oral Communication; **COMW**=Written Communication; **CLTR**=Culture; **DIVG**=Global diversity; **DIVU**=U.S. diversity; **NSCI**=Natural sciences; **NCSL**=Natural sciences lab; **QUAL**=Quantitative literacy; **SSOC**=Self and society; **SSOF**=Self and society foundation; **COLL**=Collaboration; **PROB**=Problem solving

**Please Print**

Initiator: Grant Snider Date Sent: September 5, 2017

Proposal Contact: John Scott Gray Email: [JohnScottGray@Ferris.edu](mailto:JohnScottGray@Ferris.edu)

Department: Humanities Campus Address: Johnson Hall 119

University General Education Committee: Click here to enter text.

Chair: Click here to enter text. Date Returned: Click here to enter text.

Based upon University General Education Committee review on Click here to enter text.(Date), we

- Support the request to designate the course listed above as a Click here to enter text. Gen. Ed. Designation(s).
- Do not support the request to designate the course listed above as a Click here to enter text. Gen. Ed. Designation(s) for reasons listed below.

Comments: Click here to enter text.

# COMPETENCY IMPLEMENTATION PLAN (CIP)

## CULTURE

**Date:** 09/05/2017

**Course prefix, number, and title:** PHIL 120; The Good Life

**Briefly describe how this course fulfills the operational definition of the Culture core competency at Ferris State University:**

PHIL 120: The Good Life directly engages the operational definition of Culture in three significant ways: 1. the course explores several "systems of shared beliefs" as found in a variety of famous philosophical communities that have influenced Western society; 2. the course will directly explore how these systems of belief helped their followers "cope" with other people and their historical realities; 3. the course will provide ample opportunity for students to apply those belief systems to their own lives.

<b>CUL1: Interpretation</b> – Students will be able to demonstrate an increased ability to interpret cultural works and practices, including but not limited to art, music, literature, language, history, philosophy and religion, as part of a broader culture and justify those interpretations with an understanding of the interpretive process.	
<i>How will this be implemented in class?</i>	<i>How will achievement be evaluated?</i>
<p>One of the central points of emphasis in the course will be on interpreting the relevant philosophical works from a range of schools and their historical contexts. Drawing specifically from the course outcomes from the curriculum form, students will be able to:</p> <ol style="list-style-type: none"> <li>1. Enumerate the core concepts and techniques related to the good life as advanced by the different schools studied.</li> <li>2. Differentiate the core ideas from among the different philosophical schools.</li> <li>3. Appraise the relative strengths and weaknesses of those core ideas.</li> </ol>	<p>Achievement and assessment will be evaluated/measured directly through quizzes, exams, or other written projects. Pre-test/post-test writing samples also will be used to measure student progress toward increasing their skills of interpreting philosophical works.</p> <p>These assessments will be processed using the five-level rubric designed by Cliff Franklund, and the results will be included in the Philosophy Minor assessment as well as in General Education assessment.</p>
<b>CUL2: Self-Awareness</b> – Students will be able to articulate an understanding of themselves as part of culture(s) with rich historical perspectives and gain increased self-understanding through works of culture(s).	
<i>How will this be implemented in class?</i>	<i>How will achievement be evaluated?</i>
<p>Perhaps more than most Culture classes, PHIL 120 will provide a robust engagement with Self-Awareness. The philosophical schools studied had as their founding motivation self-knowledge and self-improvement. Drawing specifically from the official course outcomes, students will be able to:</p> <ol style="list-style-type: none"> <li>4. Practice some of the therapeutic techniques recommended by the different philosophies.</li> <li>5. Test the value of these concepts and techniques by applying them to their own lives.</li> <li>7. Report the results of their own personal exploration of "the good life."</li> </ol>	<p>The outcomes related to Self-Awareness will be directly measured through student journals and case study analyses. Outcome number seven will be measured directly through a major final project. All these outcomes also will be indirectly measured via exit interviews or reflection essays.</p> <p>These assessments will be processed using the five-level rubric designed by Cliff Franklund, and the results will be included in the Philosophy Minor assessment as well as in General Education assessment.</p>

<p><b>CUL3: Analysis</b> – Students will be able to develop justify and improve value distinctions (including aesthetic and ethical) in perception, craft and/or life choices.</p>	
<p><i>How will this be implemented in class?</i></p>	<p><i>How will achievement be evaluated?</i></p>
<p>The precise analysis of texts, concepts, and values is at the heart of philosophy, and PHIL 120 is no exception. Drawing specifically from the course outcomes, students will be able to:</p> <p>3. Appraise the relative strengths and weaknesses of those core ideas.</p> <p>5. Test the value of these concepts and techniques by applying them to their own lives.</p>	<p>Achievement will be directly measured for outcome number three through quizzes, exams, or other written projects. Achievement for outcome number five will directly measured through a student journal project, and it will be indirectly measured via exit interviews or written reflections.</p> <p>These assessments will be processed using the five-level rubric designed by Cliff Franklund, and the results will be included in the Philosophy Minor assessment as well as in General Education assessment.</p>
<p><b>CUL4 Process-Awareness, Participation</b> – Students will be able to explain the processes contexts and motivations behind the production of cultural works and practices, and when appropriate be able to participate in their creation.</p>	
<p><i>How will this be implemented in class?</i></p>	<p><i>How will achievement be evaluated?</i></p>
<p>CUL4 is an extension of CUL1, where being able to "interpret" the core philosophical works and practices requires at least some understanding of the process context and motivations. Students will need to appreciate the connection between philosophical ideas and format. Of course, the student journal and other projects have their own history in the format/process of the ancients. Again drawing from the official course outcomes, students will be able to:</p> <p>1. Enumerate the core concepts and techniques related to the good life as advanced by the different schools studied.</p> <p>5. Practice some of the therapeutic techniques recommended by the different philosophies.</p> <p>6. Formulate a life plan for implementing some of the core and ideas and techniques.</p>	<p>Achievement will be measured in the following ways:</p> <p>1. Will be directly assessed via quizzes, exams, or other written projects. (Students will be asked to explain the relationships between motivation, content, form, and process of the different philosophical schools)</p> <p>5. will be directly measured via student journal and case study analysis. (For example, when working with a case study, students might create coping cards that enlist ideas/techniques from a particular philosophy--this is a common current clinical practice in CBT but that was used in similar ways via Stoic maxims).</p> <p>6. will be directly assessed the the final project and indirectly through exit interview or written reflection.</p>



DEPARTMENT OF  
HUMANITIES

## The Good Life Spring 2018

**Professor:** Dr. Grant Snider

**Course:** PHIL 120: The Good Life (3 credits)

**Sections:** XXXX

**Office Hours:** XXXX

**Office:** Johnson Hall 122

**Office Phone:** 231.591.3615

**Department Phone:** 231.591.3675

**Email:** [sniderg@ferris.edu](mailto:sniderg@ferris.edu)

**Course Description:** This course in philosophy will explore how traditional philosophical schools have prescribed recipes on how to live “good lives” that are happy, tranquil, meaningful, and stress-free. Typical schools may include Socratic, Stoic, Epicurean, Skeptical, Cynical, Existential, and Cognitive Behavioral. Students will be asked to identify and contrast central features of these schools, to engage in personal self-exploration, and to apply some of the concepts and techniques to their own lives.

**Prerequisite:** None

**Textbooks and Materials:** Provided by professor for spring 2018

### Course Outcomes:

Upon completion of the course, students will be able to:

1. Enumerate the core concepts and techniques related to the good life as advanced by the philosophical schools studied in class.
2. Differentiate the core ideas among the different philosophical schools
3. Appraise the relative strengths and weaknesses of those core ideas.
4. Practice some of the therapeutic techniques recommended by the different philosophies.
5. Test the value of these concepts and techniques by applying them to their own lives.
6. Formulate a life plan for implementing some of the core ideas and techniques.
7. Report the results of their own personal exploration and adaption of “the good life.”

**General Education:** This course has been approved for the Culture designation under the new Gen Ed guidelines (2017).

**“form rather than inform” -- Victor Goldschmidt**

## **Course Policies:**

### **Attendance:**

You are expected to attend every class. If you do not attend class, you will find it difficult to do well in the course. This is true for many reasons: foremost, much—although obviously not all—of the thinking that will go into your projects will happen in class through discussion and activities. The success of your projects, then, can be directly influenced by your participation in class. “Class” is defined broadly to include class meetings and workshops as well as any individual or group conferences with the professor.

**Please note that I will not accept any late work unless you can offer a convincing reason (documented medical emergencies, university approved absences, etc.).**

### **Integrity:**

If you are having a challenge with a deadline or a problem with an assignment (including the problem of boredom), consult me rather than someone else’s work. Plagiarism will not be tolerated. See the Student Handbook for further details regarding possible sanctions for academic dishonesty.

Also, actions in the classroom (whether traditional or on-line classrooms) that distract or disrespect your peers or professor undermine the learning environment. Repeated actions that are disruptive, distracting, or disrespectful will serve as grounds for disciplinary actions consistent with college and university policy. For on-line courses, I reserve the right to delete postings or to limit access to discussions if I see any posts that might be disrespectful in tone or in content.

## **Projects and Grades:**

“Make him traverse a certain itinerary in the course of which he will make spiritual progress”

–Pierre Hadot

**Projects:** While you will receive more detailed assignment sheets in class, here is a summary of the major assignments for the course.

*Participation Portfolio (100 points):* Philosophy is at its best when you can personally engage in the issues, questions, and discussions. There will be four ways in which I will directly assess your class participation/preparation:

**First**, there will be “**participation tickets**,” which I will hand out when you volunteer a substantial, relevant, and meaningful comment/answer—some sort of comment that advances our discussion in a positive and noteworthy way. At the end of each class period, I will collect any tickets folks have earned. You will need to earn at least 10 tickets to receive a passing participation score for the semester.

**Second**, on a regular basis I will identify a set of students to whom I will address **direct questions** on the material and issues. The quality of the responses will be noted. If you are absent or if you have nothing to contribute, a zero will be marked for that attempt/date.

**Third**, over the course of the semester, there will be a variety of regular in-class activities: for example, in-class **quizzes** about the material, reflective writings about the issues, definitions of terms, student-generated questions about the concepts, and small group activities/presentations. Not all activities will result in a product submitted for review. Each document that is collected, though, will receive feedback to indicate how thoughtfully and thoroughly the assignment seemed to have been addressed.

**Fourth**, near the end of the course, you will be required to attend an **Exit Interview**, during which we will discuss your reflections on the course material and the assignments—especially your semester project and journal.

The evidence of participation generated collectively through these activities will be used to create a holistic semester participation score out of 100 points. There will be no make-up of the individual activities (unless there are documented medical or university excuses.)

*Spiritual Exercise Journal:* (200 points, approx. 33% of course grade)

You are to maintain a semester-long journal in which you respond to specific quotations from our primary readings. You are to compose two entries per week for ten weeks. Each entry will be worth up to ten points. Entries must adhere to the precise requirements on the complete assignment sheet. In addition to the 20 journal entries, you will include a “Good Life Plan.” Details to follow. All journal entries will be submitted on Blackboard.

*Semester Project (100 points):*

There are several options: 1) Dr. Google Annotated Bibliography 2) The Good Life Calendar 3) The Artist Within 4) The Good Life Greeting Card Collection 5) The Good Life Book Club or 6) Traditional Research or Literature Review. Details to follow.

*Final Exam (100 points):*

All students will be required to take the comprehensive final exam in order to pass the course. The exam may include both sit-down and take-home elements. There will be quotation identification, short-answer questions, and at least one essay question.

### Assignments/values:

Participation Portfolio=	100 points
Spiritual Exercise Journal=	200 points (20 entries worth up to 10 points each)
Semester Project=	100 points
Final Exam=	100 points
TOTAL=	500 points

### Grading Scale:

A 93-100%	465-500
A- 90-92%	450-464
B+ 88-89%	440-449
B 83-87%	415-439
B- 80-82%	400-414
C+ 78-79%	390-399
C 73-77%	365-389
C- 70-72%	350-364
D+ 68-69%	340-349
D 63-67%	315-339
D- 60-62%	300-314
F 0-59%	001-299 (or for plagiarism)

### Note about grades:

Faculty assign grades, but they do not give them; rather, students must earn them. Grades represent a faculty member's impartial, professional evaluation of a student's work on a given assignment or in a given course. **Note on criteria:** Assignments that are comprehensive, precise, nuanced, and specific are better than assignments that are incomplete, imprecise, superficial, and general. Assignments will be judged according to these criteria:

1. Correctness: No credit can be given to incorrect answers.
2. Completeness: Does the answer thoroughly respond to the question?
3. Coherence: Does the answer stick to the point or does it meander?
4. Competence: Is the answer properly expressed? (grammar, style, documentation)
5. Clarity: Does the answer employ the appropriate technical terms from the course? Are the relationships between ideas made clear through transitional phrases or precise commentary? Have you been more specific than general in your analysis?



**NOTICE:** While this syllabus is considered generally binding, the professor reserves the right to make changes to content, deadlines, instructional techniques, or other elements of the course.

*Ferris State University is committed to following the requirements of the Americans with Disabilities Act Amendments Act and Section 504 of the Rehabilitation Act. If you are a student with a disability or think you may have a disability, contact the Disabilities Services office at 231.591.3057 (voice), or email [ecds@ferris.edu](mailto:ecds@ferris.edu) to discuss your request further. More information can be found on the web at <http://www.ferris.edu/htmls/colleges/university/disability/>.*

*Any student registered with Disabilities Services should contact the instructor as soon as possible for assistance with classroom accommodations.*

## **PHIL 120: The Good Life**

### **Tentative/General Course Outline:**

#### **Week One:**

- Intro to course and how to do well
- Questions Explored:
  - What is Philosophy?
  - What does Philosophy have to do with the good life?
  - What is meant by “therapeutic philosophy” or “clinical philosophy”?
  - What are the differences and similarities between Philosophy and Psychology? What history do they share?
  - How do we define “mental health and illness”?
  - What is Cognitive Behavioral Therapy?

#### **Weeks Two and Three:**

- Socratic Therapy:
  - The life and death of Socrates
  - Philosophy as the preparation for death
  - Ethics and happiness
  - The Socratic Method and Psychotherapy (talking cures)
    - Why dialogue? (form and content)

#### **Weeks Four and Five:**

- Stoicism:
  - Managing emotions
  - Our role in the cosmos (macrocosm and microcosm)
  - Duties and responsibilities

- Why maxims? (form and content)
- *Memento mori*
- Epictetus, Seneca, Marcus Aurelius, James Stockdale

#### **Weeks Five and Six:**

- Epicureanism:
  - Desire for pleasure (hedonism)
  - *Tetrapharmakos*
  - Friendship and avoidance
  - Understanding the cosmos and atomism (Democritus)
  - Epicurus, Lucretius

#### **Weeks Seven:**

- Skepticism and Cynicism
  - Logic, Reason, and Tranquility (“the triumph of skepticism”)
  - The problem with strong values
  - Sextus Empiricus, Pyrrho, David Hume

#### **Week Eight:**

- Cynicism
  - “It’s not me; it’s you.” Confrontation and rejection
  - Extreme Epicureanism? Living like dogs.
  - Embracing shame?
  - Society makes us sick
  - Antisthenes, Diogenes, Hippias and Crates

#### **Weeks Nine and Ten: (May need three weeks)**

- Existentialism
  - The good (and frightening) news of nihilism
  - The struggle for meaning and passion
  - Sartre/Simone de Beauvoir: Bad Faith, Radical Freedom, Anguish, and the Problem of Alterity
  - Nietzsche: The Will to Power; The Over-man; Resentment; “all too human”
  - Heidegger: Finding authenticity; facing death; being-with-others; commitment
  - Existential Psychology: Rollo May, Irvin Yalom, Viktor Frankl

**Week 11:**

- Cognitive Behavioral Therapy and Philosophy in Practice/Case Studies:
  - Trauma
  - PTSD
  - Acceptance
  - Mindfulness (the brain and philosophical meditation)

**Week 12:**

- TBD
- Spiritual Exercise Journals Due

**Week 13:**

- Student Presentations (Semester Projects)

**Week 14:**

- Student Presentations (Semester Projects)

**Week 15:**

- Exit Interviews/Prep for Final Exam

**Final Exam:**

## PHIL 120: The Good Life

### Semester Project

You must choose ONE of the options below. This assignment is worth up to 100 points, and it is due during the last few weeks of the semester. You must present your project to the class in a professional, prepared manner. You will need to commit to a project by \_\_\_\_\_.

#### Option One: Dr. Google

This option requires you to isolate a topic, theme, concept, or philosopher relevant to our class. Once the professor approves of your topic, then you will browse the internet to find academically respectable web pages that in some way address your topic. As you locate such web sources, you are to draft an annotation regarding it.

Each entry should consist of the URL for the web page followed by a two paragraph (1/2 page) single spaced annotation of the source. The first paragraph will provide a basic summary or overview of the content and style of the web page. The second paragraph will evaluate that content in light of course readings and discussions. The second paragraph must contain documented quotations from our readings and/or from other web pages reviewed in the project. **You will need at least 10 sources.** For help: (<http://olinuris.library.cornell.edu/ref/research/skill28.htm>).

#### Option Two: 2015 Good Life Calendar

Over the semester, you are to collect at least 12 different quotations from our material that you find personally inspirational—that speak to your sense of the good life you would like to create for yourself. You will need to keep track of the authors and sources for the quotations.

Also across the semester, you should collect photos or take photos (good quality photos) that you could then combine with your inspirational quotations. There should be some connection between the content of the photos with the content of the quotations. Once combined, you will have 12 photos, each with an inspirational quotation printed across the photo. These photos would be compiled to create a 2018 Good Life Calendar. These are the fun and easy steps.

In addition to creating the calendar, you must also draft a letter to yourself in which you assign specific strategies (also tied to the class) that can help you edge closer to your sense of the good life. In other words, at the end of 2018 in what specific ways will you be closer to “the good life”? What will you have tried to do (in the form of monthly *askesis*—spiritual exercises) to attain your grand goals in life?

Students in the past actually have kept the letters/calendars to review at the end of the year. Very interesting stuff. (These calendars can also make nice gifts during the holidays.)

### **Option Three: The Artist Within**

This option requires you to design and create a work of art specifically for this course. You may create a musical performance, you may paint, sculpt, photograph, etc. You may write a set of poems or a story. New ideas seem to emerge each semester. You need only have the idea approved in advance. Of course, you will need to write a didactic or critical afterword in which you make the art meaningful in light of our course content, being sure to quote from our primary readings. (The weight of the grade will rest mostly on the quality of the critical afterword—at least 1500 words).

### **Option Four: The Good Life Greeting Card Collection**

A variation of the Good Life Calendar, you are to create a set of 12 greeting cards, each one focused on a specific “life event” and each one incorporating a different quotation from the course material. The sentiments may be humorous, serious, or even cute, but the philosophy behind the cards must be sophisticated and intended to help other people cope with or appreciate life events. In other words, these cards must make our philosophies real and of use to people not in the course.

In addition to creating these cards, you will need to draft an analysis of each card, explaining the original context/importance of the quotation, demonstrating how the quotation actually relates to the life event, and highlighting how the quotation will be of benefit to its intended audience.

### **Option Five: The Good Life Book Club**

In the spirit of a traditional book report, this option allows you to work with me to select a book related to the course ideas. You will write an analysis of the book that links it to specific readings/quotations from the course. You will be expected to address the ways in which the book echoes our content and/or the ways in which the book asks us to consider new issues of the good life. I will provide a list of books that will make good candidates.

**Option Six: Traditional Research Project or Literature Review:** Working with me, you will create a research project related to our class and to your major. There are many ways of connecting our material to most majors, and I am happy to help you focus this project.

### The Good Life Book List:

- *What Should I Do With My Life?* By Po Bronson  
ISBN-10: 0345485920  
ISBN-13: 978-0345485922
  
- *The Happiness Project* by Gretchen Rubin  
ISBN-10: 006158326X  
ISBN-13: 978-0061583261
  
- *The Art of Happiness* by Dalai Lama  
ISBN-10: 1594488894  
ISBN-13: 978-1594488894
  
- *Buddha's Brain* by Rick Hanson and Richard Mendius  
ISBN-10: 1572246952  
ISBN-13: 978-1572246959
  
- *Happiness: The Science Behind Your Smile* by Daniel Nettle  
ISBN-10: 0192805592  
ISBN-13: 978-0192805591
  
- *The How of Happiness* by Sonja Lyubomirsky  
ISBN-10: 0143114956  
ISBN-13: 978-0143114956
  
- *In Pursuit of Happiness: Better Living from Plato to Prozac* by Mark Kingwell  
ISBN-10: 0609605356  
ISBN-13: 978-0609605356
  
- *Man's Search for Meaning* by Viktor Frankl (Existential Psychology)
  - [http://www.amazon.com/Mans-Search-Meaning-Viktor-Frankl/dp/080701429X/ref=pd\\_sim\\_b\\_3?ie=UTF8&refRID=1CN944MYFVFX1E246X76](http://www.amazon.com/Mans-Search-Meaning-Viktor-Frankl/dp/080701429X/ref=pd_sim_b_3?ie=UTF8&refRID=1CN944MYFVFX1E246X76)
  
- *Happiness: A Guide to Developing Life's Most Important Skill* (WRITTEN BY molecular biologist turned Buddhist monk)
  - [http://www.amazon.com/Happiness-Guide-Developing-Lifes-Important/dp/0316167258/ref=pd\\_sim\\_b\\_9?ie=UTF8&refRID=1CN944MYFVFX1E246X76](http://www.amazon.com/Happiness-Guide-Developing-Lifes-Important/dp/0316167258/ref=pd_sim_b_9?ie=UTF8&refRID=1CN944MYFVFX1E246X76)
  
- *The Architecture of Happiness* by Alain de Botton
  - [http://www.amazon.com/Architecture-Happiness-Alain-Botton/dp/0307277240/ref=sr\\_1\\_6?s=books&ie=UTF8&qid=1410896839&sr=1-6&keywords=alain+de+botton](http://www.amazon.com/Architecture-Happiness-Alain-Botton/dp/0307277240/ref=sr_1_6?s=books&ie=UTF8&qid=1410896839&sr=1-6&keywords=alain+de+botton)

- *The Pleasures and Sorrows of Work* by Alain de Botton
  - [http://www.amazon.com/Pleasures-Sorrows-Work-Vintage-International/dp/0307277259/ref=pd\\_sim\\_b\\_4?ie=UTF8&refRID=0JT5FDS5Y7VDKCDX3D3V](http://www.amazon.com/Pleasures-Sorrows-Work-Vintage-International/dp/0307277259/ref=pd_sim_b_4?ie=UTF8&refRID=0JT5FDS5Y7VDKCDX3D3V)
  
- *Hardwiring Happiness: The New Brain Science of Contentment, Calm, and Confidence*
  - [http://www.amazon.com/Hardwiring-Happiness-Science-Contentment-Confidence/dp/0385347316/ref=sr\\_1\\_6?s=books&ie=UTF8&qid=1410897071&sr=1-6&keywords=happiness](http://www.amazon.com/Hardwiring-Happiness-Science-Contentment-Confidence/dp/0385347316/ref=sr_1_6?s=books&ie=UTF8&qid=1410897071&sr=1-6&keywords=happiness)
  
- *The Happiness Hypothesis: Finding Modern Truth in Ancient Wisdom*
  - [http://www.amazon.com/Happiness-Hypothesis-Finding-Modern-Ancient/dp/0465028020/ref=sr\\_1\\_9?s=books&ie=UTF8&qid=1410897071&sr=1-9&keywords=happiness](http://www.amazon.com/Happiness-Hypothesis-Finding-Modern-Ancient/dp/0465028020/ref=sr_1_9?s=books&ie=UTF8&qid=1410897071&sr=1-9&keywords=happiness)

**Spiritual Exercise Journal:** (psychagogic *askēsis*)

For philosophy to be experienced as a way of life (as having therapeutic benefit), it must excite the soul or spirit. Stoic philosophers practiced “psychagogic exercises”: activities meant to excite the soul/spirit and to influence action and character. Since part of the inspiration for this course came from Stoic philosophers like Epictetus and Seneca, it seems appropriate that we work not only with their abstract concepts (knowing) but with their actual lived philosophical practices (becoming). Their philosophies were meant to have immediate impact upon daily behavior and action. One technique for keeping their philosophy “real” was to exercise the spirit on a daily basis (like taking the soul to the gym—interestingly, philosophy discussions were conducted in the same gymnasia as athletic training). One key philosophical exercise was the testing of personal maxims against actual behaviors. Here is Hadot quoting Seneca who is writing about Sextius:

“Every day, we must call upon our soul to give an account of itself. . . . When the day is over and he (Sextius) had withdrawn to his room for his nightly rest, he questioned his soul: . . . In what sense are you better? . . . (Seneca again) I plead my cause before myself. . . . I examine my entire day and measure what I have done and said. I hide nothing from myself, nor am I indulgent with myself.” (Hadot, *What is Ancient Philosophy?* 200).

To simulate psychagogic *askēsis*, one of your assignments this semester is to generate a journal in which you “examine” you life in light of passages from our primary readings.

**Each week (for ten weeks) you are to draft two entries in your journal and post them through Blackboard. Each entry must follow this structure:**

1. Date of entry
2. Name of philosopher
3. Quotation from text
4. Summary of quotation (and its relevance to the associated philosophical school)
5. Application of quotation to your life (with specific references to quotation)
  - a. Key tip: In what way(s) does the quotation help you personally to cope with something specific currently happening in your own life? To understand something about your life and world? To reframe the way you think about yourself, others, or the world? (In short, how might the idea in the quotation help you make progress toward your own “good life” and why/why not?)

You may write on the same quotation up to three times, but you are encouraged to use a different quotation each time (as this will help you prepare for the final exam). Each acceptable entry is worth up to 10 points, for a total of 200 possible. I will comment on the first two entries to give you a sense of how you are doing, but the remaining entries will be graded upon completion of the assignment.

**Knowing and Becoming:** The key to success on this assignment is that you make an earnest attempt to integrate into your life the concepts from our course. Ultimately, you might reject the concepts, but the more you are willing to “test drive” them in your life, the better you will understand and appreciate them (and the better you will perform on the final exam).



## Joseph Lipar

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**From:** Kristi L Haik  
**Sent:** Wednesday, October 4, 2017 2:59 PM  
**To:** Joseph Lipar; Gayle E Driggers  
**Subject:** FW: Relg 371 Cap Justifcation



**Kristi L. Haik, Ph.D. | Dean**  
College of Arts and Sciences | Ferris State University  
820 Campus Drive - ASC 3052 | Big Rapids, MI 49307  
(231) 591-3667 office • (231) 591-2618 fax • [KristiHaik@ferris.edu](mailto:KristiHaik@ferris.edu)

---

**From:** John Scott S Gray  
**Sent:** Thursday, September 28, 2017 11:08 AM  
**To:** Kristi L Haik <[KristiHaik@ferris.edu](mailto:KristiHaik@ferris.edu)>  
**Cc:** Rachel M Foulk <[RachelFoulk@ferris.edu](mailto:RachelFoulk@ferris.edu)>; Richard Scott S Cohen <[RichardScottCohen@ferris.edu](mailto:RichardScottCohen@ferris.edu)>; Mark A Thomson <[MarkThomson@ferris.edu](mailto:MarkThomson@ferris.edu)>  
**Subject:** Relg 371 Cap Justifcation

Dean Haik,

Thank you again for taking my call today during your office hours. To reiterate the points I raised during that call, the Humanities area requests that the Relg 371 course on Buddhism cap gets set at 25. This is in line with the only other upper level religious studies course focused on one religion (Relg 370, on Christianity), whose cap is also set at 25. Both of these courses (370 and 371) because of their focus on one religion, require close textual analysis (unlike the more general 325 and 326 courses in Eastern and Western Religions, which involve much more traditional lecture). This textual analysis, which includes class discussion and extensive writing, is better achieved with the lower course cap.

Regards,

JSG

John Scott Gray

# CURRICULUM PROPOSAL SUMMARY AND ROUTING FORM

**Form A**

Effective Fall 2017

Proposal Number: (Assigned by UCC)

Proposal Title: *Leave blank – will be assigned by UCC*

Type of Curriculum Action: *Select the Proposed Action*

College: ▼

Department: *Choose a Department from the dropdown*

Program(s): \_\_\_\_\_

Initiating Individual: \_\_\_\_\_

Contact Person's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

	PLEASE PRINT and SIGN YOUR NAME	DATE	VOTE/ACTION * Number Count
Program Representative **			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain
Department/School/Faculty Representative Vote **			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain
After Department Faculty approval, email Original Word Document along with a PDF of the signature page to FSU Curriculum (fsucurriculum@ferris.edu)			
FSU Curriculum Review			
Department/School Administrator			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain
College Curriculum Committee/Faculty			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain
Dean			<input type="checkbox"/> Approve <input type="checkbox"/> Approve with Concerns <input type="checkbox"/> Not Approved
University Curriculum Committee **			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain
Senate **			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support <input type="checkbox"/> Abstain
Academic Affairs			<input type="checkbox"/> Approved <input type="checkbox"/> Hold <input type="checkbox"/> Not Approved

*\*Provide number count for each voting category. \*\*Support with Concerns or Not Support must include identification of specific concern with appropriate rationale*

*To be completed by Academic Affairs:*

Board of Trustees (Date Approved)	Academic Officers of MI (Date Approved)	Date of Implementation

Proposal Number : (Assigned by UCC)

1. **Proposal Summary:** (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights)  
[Click here to enter text.](#)

2. **Summary of Program/Degree Action Affecting Department Checksheets** – **Choose degree action and type per program from the drop down menu.** The Banner Program Code can be found in the footer of the [current checksheet](#). If creating a new program, enter “NEW” in the Banner Program Code column.

**Include [CURRENT Checksheet\(s\)](#) & [PROPOSED checksheet\(s\)](#) for each.**

Action	Degree Type	Banner Program Title	Banner Program Code
Choose an item.	Choose an item.		
Choose an item.	Choose an item.		
Choose an item.	Choose an item.		
Choose an item.	Choose an item.		

Please contact [FSUCurriculum@ferris.edu](mailto:FSUCurriculum@ferris.edu) should you need more lines than provided.

3. **Summary of All Course Action Required - Complete a Form E/F for each course:**

Prefix	Course Number	Course Title (Existing, or Newly Created Course Title)	Action
			Choose an item.
			Choose an item.
			Choose an item.
			Choose an item.
			Choose an item.
			Choose an item.
			Choose an item.

Please contact [FSUCurriculum@ferris.edu](mailto:FSUCurriculum@ferris.edu) should you need more lines than provided.

4. **Summary of All Consultations** – *Include completed consultation form in this proposal*

Consultation Form Sent	Date Sent	Department	Department Contact
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			

5. **Will External Accreditation be sought?** (For new programs or certificates only) ▼

If yes, name the organization involved with accreditation for this program. \_\_\_\_\_

6. **Is a PCAF required?** ▼ Is the PCAF approved? ▼ (If yes, supply link on Academic Affairs website where PCAF is posted.)

\_\_\_\_\_

Proposal Number: (Assigned by UCC)

7. List all other checksheets, outside of department, affected by this proposal (For assistance determining what other checksheets are affected, email [FSUCurriculum@ferris.edu](mailto:FSUCurriculum@ferris.edu)):

College	Department	Banner Program Code

Please contact [FSUCurriculum@ferris.edu](mailto:FSUCurriculum@ferris.edu) should you need more lines than provided.

8. Are there plans to offer blended or online courses? ▼

# Course Information Form

## I. ACTION:

CREATE,  MODIFY,  DELETE, OR  Update TracDat

Desired Term Effective: ▼

## II. COURSE IDENTIFICATION: *Course Prefix, Course Number – Course Title*

If deleting a course STOP HERE.

## III. COURSE DATA - TO MODIFY, INDICATE THE LETTER(S) OF ALL CHANGES (A-R): \_\_\_\_\_

**ONLY complete the fields that are proposing changes.**

A. Course Title (30 Characters) \_\_\_\_\_

B. Contact Hours: Lab: ▼ Lecture: ▼ Seminar: ▼

C. If not LEC/LAB/SEM, Choose from drop down [See Definitions in Appendix E]: ▼

D. College Code: ▼

E. Department Code: ▼

F. Credit Hours - Fixed: ▼

Credit Hours – Variable (numeric range): \_\_\_\_\_

G. Hours may be repeated for additional credit: ▼

If yes, max times repeated \_\_\_\_\_ OR max credits awarded \_\_\_\_\_

H. Levels: ▼

I. Grade Method: ▼

J. Does the proposed course replace an equivalent course? ▼

*If yes, enter equivalent course: **Course Prefix, Course Number – Course Title***

K. Term(s) Offered: \_\_\_\_\_

L. Max Section Enrollment: \_\_\_\_\_

M. Pre-requisite Course(s) **AND** minimum grade requirement in parenthesis for each course. *If left blank default will be D- and if more than one course, use "AND" or "OR" to separate:* \_\_\_\_\_

N. Other Pre-requisites or restrictions: \_\_\_\_\_

O. Co-requisite: \_\_\_\_\_

P. Course/Catalog Description (125 words):  
\_\_\_\_\_

Q. Course Outcomes and Assessment Plan:  
\_\_\_\_\_

R. Course Outline including Time Allocation:  
\_\_\_\_\_

UCC Chair Signature & Date:

Academic Affairs Approval Signature & Date:

\_\_\_\_\_

\_\_\_\_\_

**OFFICE OF THE REGISTRAR USE ONLY**

Date Rec'd: \_\_\_\_\_ Date Completed: \_\_\_\_\_ Entered:  SCACRSE,  SCADETL,  SCARRES,  SCAPREQ

# Fast Track Form

Proposal Number: (Assigned by UCC)

Proposed title: *Leave blank – will be assigned by UCC*

Type of Curriculum Action: *Select the Proposed Action*

College: ▼ Department: *Choose a Department from the dropdown*

Program(s): \_\_\_\_\_

Initiating Individual: \_\_\_\_\_

Contact Person's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

1. Proposal Summary: *Briefly describe proposed change(s)*

2. Course Identification (list each): *Attach Completed Form EF for each course*

Prefix	Course Number	Course Title (Existing, or Newly Created Course Title)	Action
			<i>Choose an item.</i>
			<i>Choose an item.</i>
			<i>Choose an item.</i>

3. Program Information: Include [CURRENT Checksheet\(s\)](#) & [PROPOSED checksheet\(s\)](#), if applicable.

4. Summary of All Consultations – *Include completed consultation form in this proposal.*

Consultation Form Sent	Date Sent	Department	Department Contact
<i>Choose an item.</i>			
<i>Choose an item.</i>			
<i>Choose an item.</i>			

	PLEASE PRINT and SIGN YOUR NAME	DATE	VOTE/ACTION * Number Count
Initiating Individual			
Department/Program Faculty **			__ Support __ Support with Concerns __ Not Support __ Abstain
After Department Faculty approval, email Original Word Document along with a PDF of the signature page to FSU Curriculum (fsucurriculum@ferris.edu)			
FSU Curriculum Review			
Department/School Administrator			__ Support __ Not Support
College Curriculum Committee			__ Support __ Support with Concerns __ Not Support __ Abstain
Dean			For information only
University Curriculum Committee			__ Support __ Support with Concerns __ Not Support __ Abstain
Senate			For information only
Academic Affairs			__ Approve __ Not Approved

\*Provide number count for each voting category. \*\*Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

**Table B7: Summary of Approval(s) Based on Type of Curricular Action**

Type of Curriculum Action	PCAF	Dean	UCC	Academic Senate	Provost	Board of Trustees	Academic Officers (MASU)
<b>GROUP I – Form A</b>							
New Degrees, Program/Majors	Yes	Action	Action	Action	Yes	Yes	Yes
Substantial Redirection of Program/Major with additional resource requirements - includes 3 or more new courses, program name changes	Yes	Action	Action	Action	Yes	Info Only	Yes
New Minor - includes 3 or more new courses required	Yes	Action	Action	Action	Yes	Info Only	No
New Concentration - includes 3 or more new courses	Yes	Action	Action	Action	Yes	Info Only	No
Non-degree offering(s)	Yes	Action	Info Only	Action	Yes	Info Only	Yes
Customization of existing program for off-campus cohort group	Yes	Action	Action	Info Only	Yes	Info Only	No
New Certificate - with more than 3 new courses required and/or other additional resource requirements	Yes	Action	Action	Info Only	Yes	Info Only	No
New Certificate - with fewer than 3 new courses required	No	Action	Action	Info Only	Yes	Info Only	No
Delete a Degree, Program/Major	No	Action	Action	Action	Yes	Yes	Yes
Substantial Revision or Redirection of Program/Major with no additional resource requirements	No	Action	Action	Action	Yes	Info Only	Yes
New Minor - with fewer than 3 new courses required	No	Action	Action	Action	Yes	Info Only	No
Delivering existing programs at new off-campus sites	No	Action	Info Only	No	Yes	Yes	Yes
Modification or elimination of a Certificate	No	Action	Action	Action	Yes	Info Only	No
Type of Curriculum Action	PCAF	Dean	UCC	Academic Senate	Provost	Board of Trustees	Academic Officers (MASU)
<b>GROUP II – Fast Track Form</b>							
Revision of Degree, Program/Major/Minor - modification of program outcomes sequence of courses, revisions to entrance, progression, or exit policies	No	Info Only	Action	Action	Yes	No	No
Curriculum clean-up: up to two, creation(s), deletion(s), or modification(s) of <ul style="list-style-type: none"> <li>• Course Title, Prefix, Credit hours, Term Offered, or Prerequisites</li> <li>• Course Descriptions, Outcomes, or Outline</li> <li>• Convert existing courses into modules</li> <li>• Creating Honors sections</li> <li>• Assigning General Education attributes</li> </ul>	No	Info Only	Action	Action	Yes	No	No
Experimental Course	No	Action	Info Only	Info Only	Yes	No	No

In order to expedite final approval and implementation, proposals may be concurrently reviewed by the Board of Trustees and the Academic Officers or, in some instances, by the Academic Officers first and then the Board of Trustees. Board of Trustees approval is required for implementation of new degrees, program/ majors, major redirection of a program/major (only if accompanied by a closure), deletion of degree or program/major, and non-degree offerings of 2 or more courses in a program of study. Concentrations and Minors are NOT reviewed by the Board of Trustees or Academic Officers. Associate degrees may be reviewed by Academic Officers. Certificates must be submitted to HLC (Higher Learning Commission) and approved before implementation.