The Ohio State University Colleges of the Arts and Sciences Course Change Request

Academic U	init				
Math			,	632	
Book 3 Listing (e.g., Portuguese)				Course Number	
Summer	Autumn	Winter	Spring X	Year 2009	
Proposed e deadlines.	ffective date:	choose one qu	earter and put s	n "X" after it; and fill in the year. See the OAA curriculum manual t	
Before you for aubacquent are needed.	ili out the "Pres Circulating For If the course:	sent Course" in ms. You may	formation, be si find that the chi than quarter or i	ructions in the OAA curriculum manual, ure to check the latest edition of the Course Offerings Bulletin and anges you need have already been made or that additional change term, please also complete the Flexibly	
COMPLETE	ALL ITEMS	HIS COLUMN		COMPLETE ONLY THOSE ITEMS THAT CHANGE	
resent Co	ULB6			Changes Requested	
. Book 3 Listi	ng: Meth				
, Number: 63	2	····			
. Full Title: Ac	tuarial Mathems	tica lil		3.	
. 18-Char. Tra	snacript Title; Ac	luarial Math 3		4.	
. Level and C	redit Hours U G	4		5.	
. Description:	Continuation of	631; Actuarial m	odels and their	6. Actuarial models and their application to insurance	
25 words or les application to	ss) Inau <i>r</i> ance and of	her financial risk	8.	and other financial risks.	
. Qirs. Offered	d : Sp Otr		······································	_) _	
. Distribution o	of Contact Time;	2 2-hr cl.		7.	
s.g., 3 cl, 1 3-h	r lab)			8.	
. Prorequialte	e(s): 6 31			9. 618	
D. Exclusion: t				10.	
iol open to)	'			11.	
. Repeatable	to a maximum o	of	credits.		
2. Off-Camput	s Field Experienc	e; None		12.	
3. Cross-listed	with: None			13.	
. In this a GE	C course? No			14,	
i. Grade optio	n (circle): Ltr ;	(S/U P	•	15.	
		s course availab		16. a)	
		on of this course		b)	
is this a Servi		rse: Y 🔲 N 🗵		c)	
	rel course inform			17.	

	General Information		
1.	Do you want the prerequisites enforced electronically (se Yes.	e the OAA manual for what can be enforced)?	
2.	Does this course currently satisfy any GEC requirement?	if so indicate which category.	
3.	What other units require this course? Have these change No other units require this course.	es been discussed with those units?	
4.	Have these changes been discussed with academic units relevant letters. N/A	that might have a jurisdictional interest in the subject	t matter? Attach
5.	is the request contingent upon other requests? If so list the No.	ne requests.	
6. The	Purpose of the proposed change. (If the proposed ch and course objectives and e-mail to <u>ascourrofc@osu</u> 930-2 seguence is designed to cover the topics of one ac	<u>.edu.)</u> tuariel exam. The professional exam is divided into t	wo independent
par	ts. The change in prerequisite allows students to take 632 in the sequence was made, we left out the change in prerequit	independently to prepare for one part of the exam. W site. This change does not affect the content of the or	men the change ourse.
	Please list Majors/Minors effected by the proposed change course is (check one): Required on major(s)/minor	Attach revisions of all effected programs. This	
6. cha	Describe any changes in library, equipment or other teach inge involves budgetary adjustments, describe the method None	ing side needed as a result of the proposed change, of funding:	if the proposed
<u> </u>	NTACT PERSON: Chunaheng Ban EMAIL: ban.	1@osu.edu PHONE: 2-6331	
Аp	proval Process The signatures on the lines in ALL	CAPS (e.g. ACADEMIC UNIT) are required.	
Аp	proval Process The signatures on the lines in ALL	CAPS (e.g. ACADEMIC UNIT) are required.	11/3/2
_	proval Process The signatures on the lines in ALL Academic Unit Undergraduate Studies Committee Chair	CAPS (e.g. ACADEMIC UNIT) are required. Chickton Colo. Printed Name	11/13/t Dele
1.	anilta Ch	CAPS (e.g. ACADEMIC UNIT) are required. Chickton Color Printed Name Printed Name	U/13/1 Date
1.	Academic Unit Undergraduata Studies Committee Chair	Crickton Ok Printed Name	Date
Ap 1. 2.	Academic Unit Undergraduata Studies Committee Chair	Crichton Ork	Date
1.	Academic Unit Undergraduate Studies Committee Chair Academic Unit Graduate Studies Committee Chair	Printed Name Printed Name Printed Name Printed Name Printed Name Deat, forward the form to the ASC Curriculum Office avilables and any supporting documentation in	Date Date Date Ce, 4132 Smith
1. 2. 3.	Academic Unit Undergraduate Studies Committee Chair Academic Unit Graduate Studies Committee Chair ACADEMIC UNIT CHAIR/DIRECTOR After the Academic Unit Chair/Director signs the requirement of the Academic Unit Chair/Director signs the requiremen	Printed Name Printed Name Printed Name Printed Name Printed Name Deat, forward the form to the ASC Curriculum Office avilables and any supporting documentation in	Date Date Date Ce, 4132 Smith
1. 2. 3.	Academic Unit Undergraduate Studies Committee Chair Academic Unit Graduate Studies Committee Chair ACADEMIC UNIT CHAIR/DIRECTOR After the Academic Unit Chair/Director signs the required, 174 West 18th Ave. or fax it to 688-5678. Attach to asccurroscotosu.edu. The ASC Curriculum Office will	Printed Name	Date Date Date Date ce, 4132 Smith an e-mail to
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