Course Change Request

College	**SBS**
Course Bulletin Listing	**COMM - COMMUNICATION**
Course Prefix	
Course Number	**613**
Course Decimal	
Full Course Title	**Media Entertainment**
Transcript Title	**MEDIA ENTERTAINMNT**
Level	**U G**
Credit Hours	**5**

College SBS

Course Bulletin Listing   COMM - COMMUNICATION

Course Prefix ____   Course Number 613   ☐ Generic course or decimal subdivision?

Full Course Title   Media Entertainment

Transcript Title   MEDIA ENTERTAINMNT

Level ☑ Undergraduate   Credit Hours 5
      ☑ Graduate

Proposed Effective Year ____   Proposed Effective Term ____

Course Bulletin

Course Description	Explores speculation, theory, and research regarding effects and appeal of media entertainment, emphasizing emotional reactions.

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Terms Offered   Quarter(s)
☐ Autumn
☐ Winter
☐ Spring
☐ Summer
☐ Summer 1
☐ Summer 2

Offering Pattern   ☑ This year   ☐ Every other year

Distribution of Class Time   2 2-hr cl.

☑ Omit distribution of class time from printing?

Prerequisities

☑ Electronic enforcement of prerequisites?

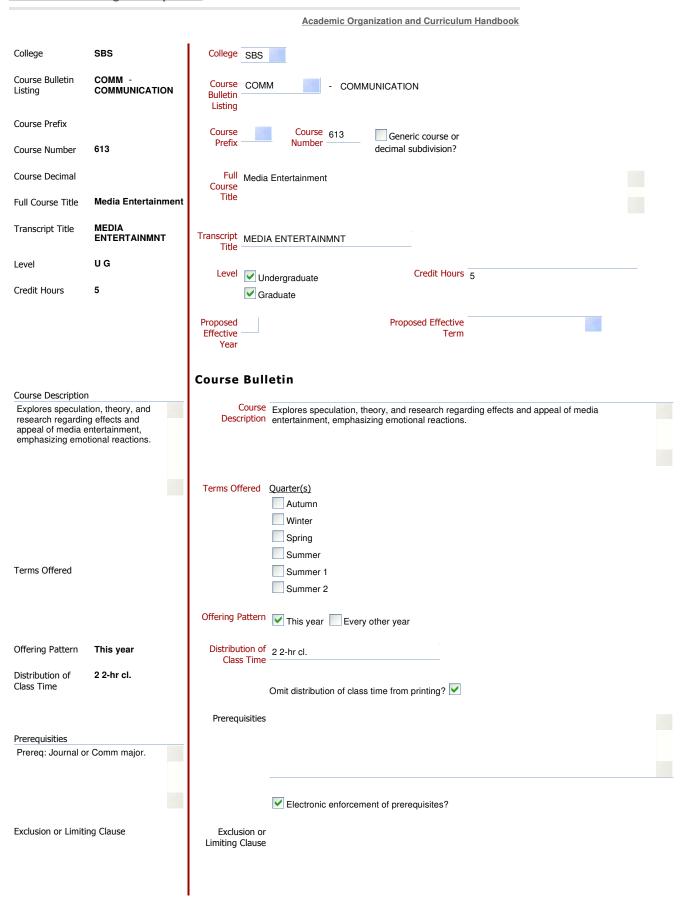|	
Terms Offered	
Offering Pattern	**This year**
Distribution of Class Time	**2 2-hr cl.**
Prerequisities	Prereq: Journal or Comm major.
Exclusion or Limiting Clause	

Exclusion or Limiting Clause

Repeatable? ☐

Repeatable? ☐

Max Repeatable
Credit Hours

Cross
Listed? ☐

Course part of a
sequence? ☐

Grade Option   **L**

Grade Option   ◉ Letter ◯ S/U ☐ Progress

☐ **GEC Course**

General Course
Information
Statement

Honors Statement ☐

☐ Off Campus/Field Experience?

☐ EM Credit?

☐ Admission Condition Course?

☐ Offered in Distance Learning Format?

☐ Service Learning?

General Information

Subject (CIP) Code 090702   Subsidy Level   M ☐

If you have questions, please contact Jed Dickhaut @ dickhaut.1@osu.edu.

Expected Section Size 0   Proposed Number of Sections Per Year 0

☐ Course time less than 1 full term or Workshop

☐ Off-campus offering?

☐ Required on Major(s)

☐ Required on Minor(s)

☐ Elective within Major(s)

☐ Elective within Minor(s)

☐ Choice of Major(s)

☐ Choice of Minor(s)

☐ A General Elective

Indicate the nature of the program adjustments, new funding, and/or withdrawals that make possible the implementation of this new course. Evidence must be given of whether the budget support will come from reallocation of existing resources or from new program funds.

Is approval of this request contingent upon the approval of other course or curricular requests?   ○ Yes ⦿ No

Describe any changes in library, equipment, or teaching aids needed

Purpose of the proposed change

Remove prerequisites. This is not a required course and we would like to be available university-wide

☐ Proposed change impacts course contents?

Describe the method of funding if the proposed changes involves budgetary adjustments

Please complete and attach the form(s) on the following page before completing the package.
Course Supplement Form

Course Contact Information

Faculty Name   Carroll J. Glynn

Faculty Email   glynn.14@osu.edu

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Contact Dept   School of Communication

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Contact Phone   6142920451

Save

Validate

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