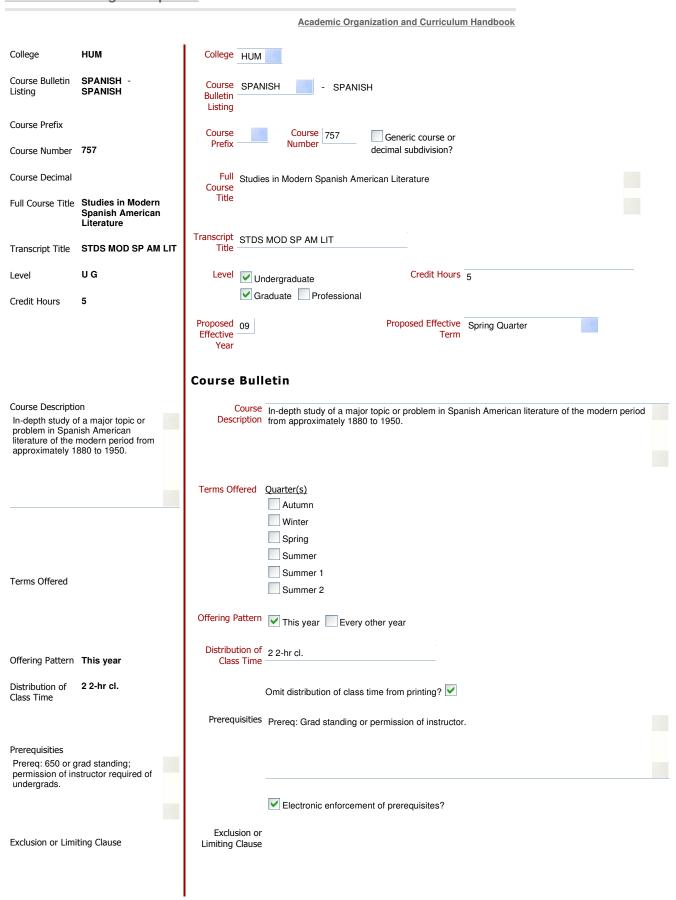
Course Change Request



| Repeatable? | Repeatable? | Max Repeatable Credit Hours 20 | | |
|---------------------------------------|--|--------------------------------------|--|--|
| Max Repeatable 20 Credit Hours | Cross | | | |
| | Listed? | | | |
| | Course part of a sequence? | | | |
| Grade Option L | Grade Option | Letter S/U Progress | | |
| | | GEC Course | | |
| | General Course Information Statement | | | |
| | Statement | | | |
| | | | | |
| | | | | |
| | | Off Campus/Field Experience? | | |
| Honors Statement | | EM Credit? | | |
| | | Admission Condition Course? | | |
| | | Offered in Distance Learning Format? | | |
| | | Service Learning? | | |
| | | | | |
| | General Info | rmation | | |
| | Subject (CIP) Code 160905 Subsidy Level D 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 | n Major(s) | | |
| | Elective within | n Minor(s) | | |
| | Choice of Maj | or(s) | | |
| | Choice of Min | or(s) | | |
| | | | | |
| | | | | |

| A General Elective | |
|---|---|
| Indicate the nature of the program adjustments, new funding, and/or withdrawals that r possible the implementation of this new course. Evidence must be given of whether the support will come from reallocation of existing resources or from new program funds. | |
| na | |
| | |
| | |
| | |
| | |
| Is approval of this request contingent upon the approval of other course or curricular requests? Yes No | |
| requests? Tes No | |
| Describe any changes in library, equipment, or teaching aids needed | |
| | |
| | |
| | |
| Purpose of the proposed change | |
| na | |
| ••• | |
| | |
| | |
| Proposed change impacts course contents? | |
| Describe the method of funding if the proposed changes involves budgetary adjustments | 5 |
| | |
| | |
| | |
| | |

Please complete and attach the form(s) on the following page before completing the package. $\frac{\text{Course Supplement Form}}{\text{Course Supplement Form}}$

Course Contact Information



Save Validate

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