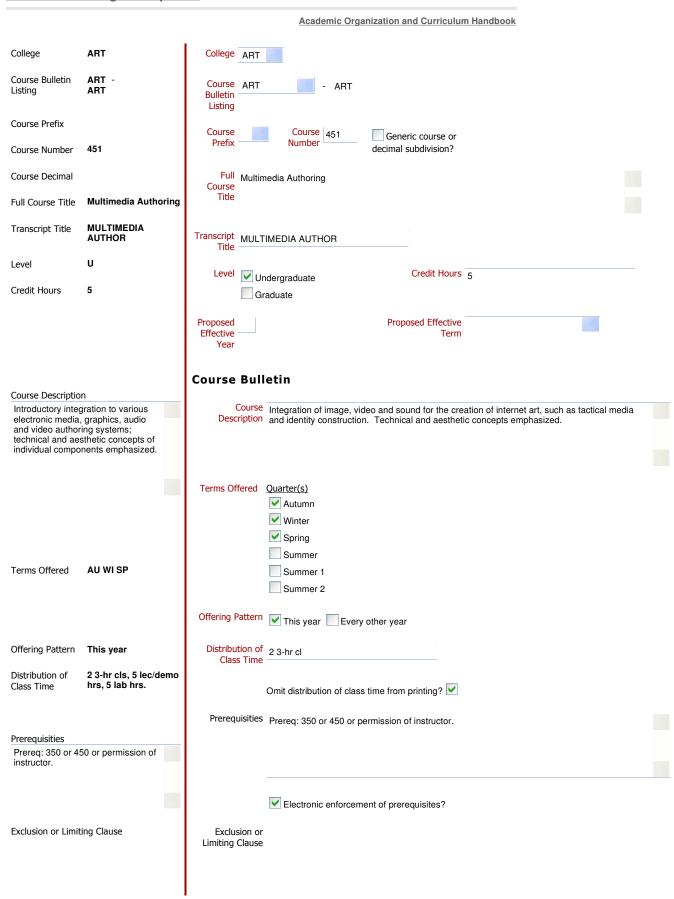
Course Change Request



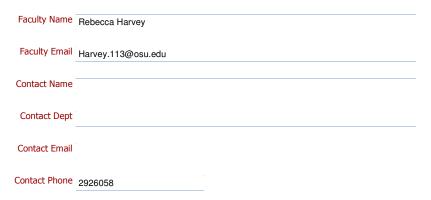
	1	
Repeatable?	Repeatable?	Max Repeatable Credit Hours 15
Max Repeatable 15 Credit Hours	Cross Listed?	
	Course part of a	
	sequence?	
Grade Option L	Grade Option	● Letter ○ S/U □ Progress
		GEC Course
	General Course Information Statement	
Honors Statement		Off Campus/Field Experience? EM Credit?
		Admission Condition Course?
		Offered in Distance Learning Format?
		Service Learning?
		Service Learning?
	General Info	<u>rmation</u>
	Subject (C	CIP) Code 500706 Subsidy Level B
	If you	have questions, please contact Jed Dickhaut @ dickhaut.1@osu.edu.
	Expected Se	ction Size 0 Proposed Number of Sections Per Year 0
	Course time le	ess than 1 full term or Workshop
	Off-campus o	ffering?
	Required on N	Major(s)
	Required on N	Minor(s)
	Elective within	n Major(s)
	Elective within	n Minor(s)
	Choice of Maj	ior(s)
	Choice of Min	or(s)

A General Elective	
Indicate the nature of the program adjustments, new funding, and/o possible the implementation of this new course. Evidence must be gi support will come from reallocation of existing resources or from new	iven of whether the budget
Is approval of this request contingent upon the approval of other correquests? Yes No	urse or curricular
Describe any changes in library, equipment, or teaching aids needed	I
Purpose of the proposed change	
Clarify and eliminate unnecessary wording.	
Clarify and eliminate unnecessary wording.	
Clarify and eliminate unnecessary wording.	dgetary adjustments
Clarify and eliminate unnecessary wording. Proposed change impacts course contents?	dgetary adjustments
Clarify and eliminate unnecessary wording. Proposed change impacts course contents?	dgetary adjustments

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

Course Supplement Form

Course Contact Information



Save Validate

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