Course Change Request

College	**ART**
Course Bulletin Listing	**ART - ART**
Course Prefix	
Course Number	**691**
Course Decimal	**10**
Full Course Title	**Painting**
Transcript Title	**STUDIO 2 PAINTING**
Level	**U G**
Credit Hours	**2-5**

College ART

Course Bulletin Listing ART - ART

Course Prefix **Course Number** 691 ☑ Generic course or decimal subdivision? **Course Decimal** 10

Full Course Title Painting

Transcript Title STUDIO 2 PAINTING

Level ☑ Undergraduate ☑ Graduate   **Credit Hours** 2-5

Proposed Effective Year   **Proposed Effective Term**

Course Bulletin

Course Description

Course Description

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

Terms Offered	
Offering Pattern	**This year**
Distribution of Class Time	

Offering Pattern ☑ This year ☐ Every other year

Distribution of Class Time

Omit distribution of class time from printing? ☑

Prerequisities

Prereq: 670 or grad standing, and submission of 10-15 drawings/paintings on Advising Day previous to the intended qtr of study; open only to students with a successful review by the area

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☑ Electronic enforcement of prerequisites?

Exclusion or Limiting Clause

Repeatable? ☑

Max Repeatable Credit **20**
Hours

Grade Option   **L**

Honors Statement ☐

Repeatable? ☑   Max Repeatable Credit Hours   20

Cross
Listed? ☐

Course part of a
sequence? ☐

Grade Option   ⦿ Letter ◯ S/U ☐ Progress

☐ **GEC Course**

General Course
Information
Statement

☐ Off Campus/Field Experience?
☐ EM Credit?
☐ Admission Condition Course?
☐ Offered in Distance Learning Format?
☐ Service Learning?

General Information

Subject (CIP) Code 500702   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

Clarify prereqs.

☐ 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 Rebecca Harvey

Faculty Email Harvey.113@osu.edu

Contact Name

Contact Dept

Contact Email

Contact Phone 2926058

Save   Validate

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