

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

Psychology

Academic Unit

Psychology

836.02

Book 3 Listing (e.g., Portuguese)

Course Number

Summer Autumn Winter Spring X Year 2007

Proposed effective date: choose one quarter and put an "X" after it; and fill in the year. See the OAA curriculum manual for deadlines.

A. Course Offerings Bulletin Information. Follow instructions in the OAA curriculum manual. Before you fill out the "Present Course" information, be sure to check the latest edition of the *Course Offerings Bulletin* and subsequent Circulating Forms. You may find that the changes you need have already been made or that additional changes are needed. If the course offered is less than quarter or term, please also complete the Flexibly Scheduled/OffCampus/Workshop Request form.

COMPLETE ALL ITEMS THIS COLUMN

Present Course

1. Book 3 Listing: Psychology _____
2. Number: 836.02 _____
3. Full Title: Maturity and Aging _____
4. 18-Char. Transcript Title: Maturity and Aging _____
5. Level and Credit Hours G 03 _____
6. Description: Survey of adulthood: normative episodes, problems of stress, adaptation, social interaction and physical and intellectual functioning in historical and modern context.
(25 words or less) _____
7. Qtrs. Offered : Spring _____
8. Distribution of Contact Time : 2 and half hour: lecture/ discussion
(e.g., 3 cl, 1 3-hr lab) _____
9. Prerequisite(s):
 Graduate standing _____
10. Exclusion: none
(Not open to....) _____
11. Repeatable to a maximum of 0 _____ credits.
12. Off-Campus Field Experience: no _____
13. Cross-listed with: none _____
14. Is this a GEC course? no _____
15. Grade option (circle): X Ltr S/U P
If P graded, what is the last course in the series? _____
16. Is an honors version of this course available? No _____
17. Other general course information: _____

**COMPLETE ONLY THOSE ITEMS THAT CHANGE
Changes Requeste**

1. _____
2. 837 _____
3. Maturity and Aging _____
4. _____
5. _____
6. Description: Psychology of adulthood and aging; social and intimate interactions; problems of coping; normative episodes; stress; cognitive functioning and influence of contexts.. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____
16. _____
17. _____

B. General Information

1. Do you want the prerequisites enforced electronically (see the OAA manual for what can be enforced)?
no

2. Does this course currently satisfy any GEC requirement, if so indicate which category?
no

3. What other units require this course? Have these changes been discussed with those units?
none

4. Have these changes been discussed with academic units that might have a jurisdictional interest in the subject matter?
Attach relevant letters.
Not applicable

5. Is the request contingent upon other requests, if so, list the requests?
No

6. **Purpose of the proposed change. (If the proposed change affects the content of the course, attach a revised syllabus and course objectives and e-mail to ascurofc@osu.edu.)**
The original course number was a decimal extension of 836 listed as 836.02 course number. We want to put the course in the logical series of developmental offerings, starting with 834, 835, 836 and the proposed 837 number to represent infancy, child, adolescence and adulthood (the maturity and aging) developmental graduate course offerings.

7. Please list Majors/Minors affected by the proposed change. Attach revisions of all affected programs. This course is (check one):
 Required on major(s)/minor(s) A choice on major(s)/minors(s)
 An elective within major(s)/minor(s) A general elective:
 Not applicable

8. Describe any changes in library, equipment or other teaching aids needed as a result of the proposed change or if the proposed change involves budgetary adjustments, describe the method of funding:
None

Approval Process The signatures on the lines in ALL CAPS (e.g. ACADEMIC UNIT) are required.

1. Academic Unit Undergraduate Studies Committee Chair	Printed Name	Date
	Marilynn Brewer	5/26/06
2. Academic Unit Graduate Studies Committee Chair	Printed Name	Date
	Gifford Weary	5-30-06
3. ACADEMIC UNIT CHAIR/DIRECTOR	Printed Name	Date
4. After the Academic Unit Chair/Director signs the request, forward the form to the ASC Curriculum Office, 105 Brown Hall, 190 West 17 th Ave. or fax it to 688-5678. Attach the syllabus and any supporting documentation in an e-mail to ascurofc@osu.edu . The ASC Curriculum Office will forward the request to the appropriate committee.		
5. COLLEGE CURRICULUM COMMITTEE	Printed Name	Date
	W. Scott McEwan	10/3/06
6. ARTS AND SCIENCES EXECUTIVE DEAN	Printed Name	Date
	Edward Adel	10/4/06
7. Graduate School (if appropriate)	Printed Name	Date
8. University Honors Center (if appropriate)	Printed Name	Date
9. Office of International Affairs (study tours only)	Printed Name	Date
10. ACADEMIC AFFAIRS	Printed Name	Date