

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

Dance
Academic Unit

Dance 601.07
Book 3 Listing (e.g., Portuguese) Course Number

Summer Autumn **X** Winter Spring 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/Off-Campus/Workshop Request form.

COMPLETE ALL ITEMS THIS COLUMN

Present Course

1. Book 3 Listing: Dance

2. Number: 601.07

3. Full Title: Supplemental Studies: Alexander Technique

4. 18-Char. Transcript Title: Alexander Technique

5. Level and Credit Hours: U G 2

6. Description:
(25 words or less)

7. Qtrs. Offered: Sp

8. Distribution of Contact Time: 2 - 1.5 hr cl
(e.g., 3 cl, 1 3-hr lab)

9. Prerequisite(s):

10. Exclusion:
(Not open to...)

11. Repeatable to a maximum of 5 credits.

12. Off-Campus Field Experience:

13. Cross-listed with:

14. Is this a GEC course?

15. Grade option (circle): Ur X S/U P
If P graded, what is the last course in the series?

16. Is an honors version of this course available? Y N
Is an Embedded Honors version of this course available? Y N

17. Other general course information:

COMPLETE ONLY THOSE ITEMS THAT CHANGE

Changes Requested

1. _____

2. 671.33

3. Somatic Practices: Alexander Technique

4. _____

5. _____

6. _____

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)?
N/A

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?
N/A

4. Have these changes been discussed with academic units that might have a jurisdictional interest in the subject matter? Attach relevant letters.
N/A

5. Is the request contingent upon other requests, if so, list the requests?
Please see cover letter for proposed general area of study and subdivisions.

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 ascurrefo@osu.edu.)
Necessary changes, due to the department's desire to create a permanent somatics curriculum.

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:

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.
N/A

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

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|--|--------------|------|
| 1. Academic Unit Undergraduate Studies Committee Chair | Printed Name | Date |
| 2. Academic Unit Graduate Studies Committee Chair | Printed Name | Date |
| 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 688-8678. Attach the syllabus and any supporting documentation in an e-mail to ascurrefo@osu.edu . The ASC Curriculum Office will forward the request to the appropriate committee. | | |
| 5. COLLEGE CURRICULUM COMMITTEE | Printed Name | Date |
| 6. ARTS AND SCIENCES EXECUTIVE DEAN | Printed Name | Date |
| 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 |