

OHIO STATE COURSE CHANGE REQUEST

College: Business
 (e.g., Dept. of Spanish & Portuguese)

Department: Management and Human Resources
 (e.g., Portuguese)

Proposed Effective Qtr/Yr: SU AU WI SP YEAR: 2007-2008 (See OAA Manual for Deadlines)

A. Course Offerings Bulletin Information. Follow instructions in the OAA Procedures 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, term, or semester, please also complete the Flexibly Scheduled/Off Campus/Workshop Request Form.

COMPLETE ALL ITEMS THIS COLUMN	COMPLETE ONLY THOSE ITEMS THAT CHANGE
Present Course	Changes Requested
1. Book 3 Listing:	
2. Number: 290	
3. Full Title: Innovation and Entrepreneurship in Modern Business	Entrepreneurship
4. 18-Char. Transcript Title:	ENTREPRENEURSHIP
5. Level and Credit Hours: U-5	
6. Description: Assesses innovation and entrepreneurship in the evolution and current understanding of business. Examines theoretical foundations, characteristics of entrepreneurs, and role of personal creativity in entrepreneurship.	Assesses economical, sociological, and psychological foundations of entrepreneurship and its impact on society. Examines perspectives, characteristics of entrepreneurs, and role of personal creativity in entrepreneurship.
7. Qtrs. Offered: SU <input type="checkbox"/> AU <input checked="" type="checkbox"/> WI <input checked="" type="checkbox"/> SP <input type="checkbox"/> 1st SEM <input type="checkbox"/> 2nd SEM <input type="checkbox"/>	SU <input type="checkbox"/> AU <input checked="" type="checkbox"/> WI <input checked="" type="checkbox"/> SP <input type="checkbox"/> 1st SEM <input type="checkbox"/> 2nd SEM <input type="checkbox"/>
8. Distribution of Contact Time: 2 2-hr cl <small>(a. 3rd Writing Course)</small>	
9. Prerequisite(s):	
10. Exclusion: <small>(Not applicable)</small>	
11. Repeatable to a maximum of ___ credits	Repeatable to a maximum of ___ credits
12. Off Campus Field Experience:	
13. Cross-listed with:	Cross-listed with:
14. Check the curricular requirement this course fulfills: BER <input type="checkbox"/> LAR <input type="checkbox"/> GEC <input type="checkbox"/> 3rd Writing Course <input type="checkbox"/>	Check the curricular requirement this course fulfills: BER <input type="checkbox"/> LAR <input type="checkbox"/> GEC <input checked="" type="checkbox"/> 3rd Writing Course <input type="checkbox"/>
15. Grade option: Ltr <input type="checkbox"/> S/U <input type="checkbox"/> P <input type="checkbox"/> If P graded, what is the last course in the series?	Grade option: Ltr <input type="checkbox"/> S/U <input type="checkbox"/> P <input type="checkbox"/> Last course in Progress series?
16. Is an honors version of this course available: Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
17. Other general course information:	

B. General information:

- 1. Do you want BRUTUS to enforce the prerequisites? YES NO
- 2. Does this course currently satisfy any GEC requirement? YES NO
- 3. What other units require this course?
Have these changes been discussed with those units? YES NO
- 4. Have these changes been discussed with academic units that might have a jurisdictional interest in the subject matter? (Attach relevant letters.) YES NO
- 5. Is this request contingent upon other requests? YES NO
List: _____

6. Purpose of this proposed change. (If the proposed change affects the content of the course, attach a revised syllabus and course objectives.)

To position course for GEC credit and as a required course in the undergraduate interdisciplinary Entrepreneurship minor

7. Describe any changes in library, equipment or other teaching aids needed as a result of the proposed change:

8. If the proposed change involved budgetary adjustments, describe the method of funding:

APPROVAL SIGNATURES (As need. All signatures on lines in ALL CAPS (e.g. ACADEMIC UNIT) must be completed.

 David R Greenberger 4/9/07
ACADEMIC UNIT CHAIR Printed Name Date

 RAO UNNAVA 4/9/07
Academic Unit Undergraduate Studies Committee Chair (Undergrad course) Printed Name Date

Academic Unit Graduate Studies Committee Chair (Undergrad/Grad course) Printed Name Date

School/College Undergrad Curriculum Committee (Undergrad/Grad course) Printed Name Date

School/College Graduate Curriculum Committee (Undergrad/Grad course) Printed Name Date

School Director (If Appropriate)  Stephen Hengge 4/9/07
COLLEGE DEAN Printed Name Date

Graduate School (If Appropriate) Printed Name Date

ASC Curriculum Committee Chair (If Appropriate) Printed Name Date

University Honors Center (If Appropriate) Printed Name Date

Office of International Education (study tour only) Printed Name Date

ACADEMIC AFFAIRS Printed Name Date