

University of Toledo

APR 15 2013

Existing Graduate Course Modification Form

COLLEGE OF GRADUATE STUDIES

Contact Person Phone (XXX-XXXX)

Email

Present

Proposed

College

Dept/Academic Unit

Course Alpha/Numeric

Course title

Credit hours: Fixed or Variable: to

College

Dept/Academic Unit

Course Alpha/Numeric

Course title

Credit hours: Fixed or Variable: to

Cross Listings:

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Prerequisites(s) (if more than 50 characters, please place it in Catalog Description)

Prerequisites(s) (if more than 50 characters, please place it in Catalog Description)

Co-requisites(s) (if more than 50 characters, please place it in Catalog Description)

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Catalog Description (only if changed) 75 words max:

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Has course content changed? If yes, give a brief topical outline of the revised course below (less than 1500 words)

Minimum and maximum hour change only. Maximum reduced to 4 credit hours as that is that maximum required by the program.

Proposed Effective Term List any course(s) to be deleted Date
 Date

Attach new syllabus reflecting course modifications.
Attach additional documents if necessary.

** Course is for MPH program which is under NOCPH.*

Course Approval

Department Curriculum Authority	<input type="text" value="Shery Mulz"/>	Date	<input type="text" value="4-2-13"/>
Department Chairperson	<input type="text" value="Shery mulz"/>	Date	<input type="text" value="4-2-13"/>
* NOCPH College Curriculum Authority or Chair	<input type="text" value="Brian A. Gish"/>	Date	<input type="text" value="4/3/13"/>
College Dean	<input type="text" value="Jeffrey J. Gelman"/>	Date	<input type="text" value="4/4/13"/>
Graduate Council	<input type="text" value="PLH Paul"/>	Date	<input type="text" value="4-30-2013"/>
Dean of Graduate Studies	<input type="text"/>	Date	<input type="text"/>
Office of the Provost	<input type="text" value="Jeffrey J. Gelman"/>	Date	<input type="text" value="4/4/13"/>

For Administrative Use Only

Effective Date

CIP Code

Subsidy Taxonomy

Program Code

Instruction Level