

JAN 23 2012

The University Of Toledo OF GRADUATE STUDIES Existing Course Modification Form

Administrative Use Only
Code\*: CM
Date Received: / / (mm/dd/yyyy)
Effective Date: / / (mm/dd/yyyy)
CIP Code (if changed):
Subsidy (if changed):

\* denotes required fields

Please enter the changes below to each existing course. If changes are too extensive for this format, attach a page with all information.

College\*: Health Science & Human Service Dept/Academic Unit\*: Counselor Education and School Psych
Course Alpha/Numeric\*: COUN 5020
Contact Person\*: Kathleen Salyers Phone: 530-6125 (xxx - xxxx) Email: Kathleen.Salyers@utoledo.edu

Present
Supply all information asked for in this column. (Supply core and transfer module info if applicable.)
Course Title\*: Professional Orientation to Community Counseling
Credit Hours\*: 3
CrossListings:
Insert
Remove
Prerequisite(s) if prerequisite is longer than 50 characters, please place it in Catalog Description):
Catalog Description (only if changed):

Proposed
Fill in appropriate blanks only where entry differs from first column.
Course Title\*: Professional Orientation to Clinical Mental Health Counseling
Credit Hours\*: 4
CrossListings:
Insert
Remove
Prerequisite(s) if prerequisite is longer than 50 characters, please place it in Catalog Description):
Catalog Description (only if changed):

- Univ Core: Engl Hum Math Sci Soc Sci
US Culture Non-US Culture
Transfer Module: Arts & Humanity Engl Math
Social Science Natural Science & Physics

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US Culture Non-US Culture
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Social Science Natural Science & Physics

Reason for change\*
To meet new accreditation requirements.

Has course content changed? No Yes If course content is changed, give a brief topical outline of the revised course below ( less than 1500 words.)

Added substance abuse counseling and program evaluation in order to meet new accreditation requirements.

Or attach an electronic copy of outline:

Browse...

Has the course changed from a non-core curriculum course to a core curriculum course?  No  Yes If so, explain how this course fulfills the core curriculum/general education guidelines in Faculty Senate Website and submit a course syllabus using the template:

List any course or courses to be dropped.

Effective Date: Mon / Day / Year

Approval:

Department Curriculum Authority:

Judy Skov

Date: Month 9 / Day 13 / Year 11

Department Chairperson:

Lynda Ritchie

Date: Month 9 / Day 13 / Year 2011

College Curriculum Authority:

Bruce W. ...

Date: Month 01 / Day 11 / Year 12

College Dean:

Barbara Bay

Date: Month 1 / Day 11 / Year 12

After college approval, submit the original signed form to the Faculty Senate (UH 3320) for undergraduate-level courses; for graduate-level courses submit the original signed form to the Graduate School (UH3240). For undergraduate/graduate dual-level courses, submit the proposals to each office.

UUC or Graduate Council Curriculum Chair:

[Signature]

Date: Month 2 / Day 7 / Year 2012

Faculty Senate Core Curriculum Committee Chair:

[Signature]

Date: Month / Day / Year

Office of the Provost :

[Signature]

Date: Month / Day / Year

Registrar's Office:

[Signature]

Date: Month / Day / Year

Submit Course Modification

You will see a confirmation page after you press the submit button. If you do not see the confirmation page, please call x 4320 or send an email to ProvostWebMaster.utoledo.edu. Thanks.