Administrative Use Only



JAN 23 2012

The University Of Taladaos

The University	OPAULEUU!	DIEC	Code*;	CM	3 (
	GRADUATE STU	NIEO	Date Rece	ived: /	/ (mm/dd/yyyy)		
Existing Course Modification Form * denotes required fields Please enter the changes below to each existing course. If changes are t extensive for this format, attach a page with all information.			Effective I	Date: /]/ (mm/dd/yyyy)		
			CIP Code (if changed): Subsidy (if changed):				
							College*: Health Science & Human S Counselor Education and School Psych
Course Alpha/Numeric*: COUN	- 7510						
Contact Person*: Nick Piazza	Phone: 530-4721	(XX	x - xxxx)	Email: Nick.P.	iazza(@utoledo.edu		
Present				Propos	sed		
Supply all information asked for in this column. (Supply core and transfer module info if applicable.) Course Title*: Advanced Seminar in Supervision & Consultation		Fill in appropriate blanks only where entry differs from first column. Course Title: Advanced Seminar in Supervision & Consultation					
'redit Hours*: 3			Credit Hours: A				
CrossListings:	Insert	CrossLis	tings:		Insert		
	To add a course, type in course 1D and click the Insert button.				To add a course, type in course ID and click the Insert button.		
	To remove a course, select the course on left and click the Remove button.				To remove a course, select the course on left and click the Remove button.		
	Remove	4			Remove		
Prerequisite(s)(if prerequisite is longer than Catalog Description):	 50 characters, please place it in		site(s)if prere Description):	quisite is longer the	an 50 characters, please place it in		
Catalog Description (only tf changed):		Catalog Description (only if changed):					
Univ Core: Engl Hum Math Sci Soc Sci		Univ Core: Engl Hum Math Sci Soc Sci					
US Culture Non-US Culture Transfer Module: Arts & Humanity Engl Math		US Culture Non-US Culture Transfer Module: Arts & Humanity Engl Math					
							Social Science
Reason for change*							
To meet licensure requirements from the C	Ohio Counselor, Social Worker, a	and Marria	ze & Family	Therapist Board.			
Has course content changed? No o o o o o o o o o	Yes If course content is chang	ed, give a	brief topical (outline of the revis	ed course below (less than 1500		

The Ohio Counselor, Social Worker, and Marriage & Family Therapist Board requires that we include content relevant to the Ohio Counselor licensure law, rules, and regulations specific to counselor supervision and consultation in the State of Ohio.

Or attach an electronic copy of outline:

E:\My Documents\My Lectures\7510 Supervision\Syllabi\COUN_7510_Proposal.doc

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:	Effective Date: Month / Day / Year					
	Approval:	1	m	2			
Department Curriculum Authority:		ionth /					
Department Chairperson:	Date M	ionth(/	Da ý /	YERO 4			
College Curriculum Authority:	By Warm Date M	Ionth0//	Day]/	Year / ~			
College Dean:	Barbara Date M	lonth /	Day //	Year /			
	rm to the Faculty Senate (UH 3320) for undergraduate-level cool (UH3240). For undergraduate/graduate dual-level courses						
UUCC or Graduate Council Curriculum Chair:	Date M	lonth /	. 7 Day /	2012 Year			
Faculty Senate Core Curriculum Committee Chair:	Date M	lonth /	Day /	Year			
Office of the Provost:	Date M	onth /	Day /	Year			
Registrar's Office:	Date M	onth /	Day /	Year			
	S. S		•				

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.utolcdo.cdu. Thanks.

Submit Course Modification