

APPROVED

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# The University Of Toledo

DEC 05 2012

## Existing Graduate Course Modification Form

COLLEGE OF GRADUATE STUDIES

\* denotes required fields

Contact Person\*: Mark Vonderembse Phone: 530-4319 (xxx-xxxx) Email: Mark.Vonderembse@uto

### Present

### Proposed

Supply all information asked for in this column. ( Supply core, researc intensive and transfer module info if applicable)

Fill in appropriate blanks only where entry differs from first column.

College\*: Coll Business and Innovation

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Dept/Academic Unit\*: Finance and Business Economics

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Course Alpha/Numeric\*: BANS 5210

Course Alpha/Numeric: FINA 5210

*only change*

Course Title\*: Economics for Business Decision Course Title: No change

Credit hours\*: Fixed: or Variable: to Credit Hours: Fixed: or Variable: to

### CrossListings:

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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.

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To remove a course, select the course on left and click the Remove button.

Prerequisite(s)(if longer than 50 characters, please place it in Catalog Description):

Prerequisite(s)(if longer than 50 characters, please place it in Catalog Description):

Corequisite(s)(if longer than 50 characters, please place it in Catalog Description):

Corequisite(s)(if longer than 50 characters, please place it in Catalog Description):

Catalog Description (only if changed) 75 words max:

Catalog Description (only if changed) 75 words max:

*No change*

Has course content changed?

Yes

No

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

Proposed effective term\*: 201340 ( e.g. 201140 for 2011 Fall)

Attach new syllabus reflecting course modifications\*

Additional Attachment 1:

List any course or courses to be deleted.

Effective Date:



Effective Date:



**Approval:**

Department Curriculum Authority:

*Mark Anderson*

Date 11/28/12

Department Chairperson:

*Mark Anderson*

Date 11/28/12

College Curriculum Authority or Chair:

*M. Williams*

Date 12-3-2012

College Dean:

*Kendrick*

Date 11/28/12

Graduate Council:

*[Signature]*

Date 1-22-2013

Dean of Graduate Studies:

*[Signature]*

Date

Office of the Provost :

Date

**Administrative Use Only**

**Effective Date:**

 (YYYY/MM/DD)

**CIP Code:**

**Subsidy Taxonomy:**

**Program Code:**

**Instructional Level:**

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