University of Toledo

Existing Graduate Course Modification Form COLLEGE OF
GRADUATE STUDIES

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Present	**Proposed**
College	Nursing	College	Nursing
Dept/Academic Unit	Doctor of Nursing Practice	Dept/Academic Unit	Doctor of Nursing Practice
Course Alpha/Numeric	NURS	7970	Course Alpha/Numeric	NURS	7970
Course title	Capstone Practicum: Direct Care	Course title	Capstone Practicum: Direct Care
Credit hours: Fixed 7 or Variable: to	Credit hours: Fixed 7 or Variable: to

Cross Listings:

Cross Listings:

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

Admission to DNP program, NURS 7011 Theoretical Basis for Evidence -Based Practice, and permission of course faculty and capstone advisor

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

Admission to DNP program, (NURS 7010 Scientific Basis of Nursing Practice or NURS 7011 Theoretical Basis of Advanced Nursing Practice), permission of the course faculty and capstone advisor

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:

No change

Catalog Description (*only if changed*) 75 words max:

No Change

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

Proposed Effective Term [2012] [40 (Fall)]　List any course(s) to be deleted [　　　　] Date [　　　]

[　　　　] Date [　　　]

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

Course Approval

		Date	
Department Curriculum Authority		Date	
Department Chairperson	_Dianna Amalu, Ph.D, RN_	Date	4-10-12
College Curriculum Authority or Chair	_Susan Sochacki, PhD RN_	Date	4-10-12
College Dean	_Timothy Gasper (K.G)_	Date	4-10-12
Graduate Council		Date	5-17-2012
Dean of Graduate Studies		Date	
Office of the Provost		Date	