The University Of Toledo

Existing Course Modification Form

* 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*: Education
Course Alpha/Numerical*: RESM 6320
Contact Person*: Gregory Stone
Phone: 530-7224

Present

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

Course Title*: Research Design
Credit Hours*: 3
CrossListings:

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.

Prerequisite(s)(if prerequisite is longer than 50 characters, please place it in Catalog Description):
RESM 5110/7110 or AOI

Catalog Description (only if changed):

Proposed

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

Course Title:
Credit Hours: 3
CrossListings:

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.

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

Catalog Description (only if changed):

http://curriculumtracking.utoledo.edu/CourseMod.asp
In order to successfully challenge the material presented in the course, a grade of C (Average) is required.

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).

Or attach an electronic copy of outline:

[Choose File] no file selected

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: ___________ / ______ / ___________

Approval:

Department Curriculum Authority:

William M. Gray  Date 03/18/2011

Department Chairperson:

William M. Gray  Date 03/18/2011

College Curriculum Authority:

Beverly Fischetti  Date 04/11/2011

College Dean:

Beverly Fischetti  Date 04/11/2011

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 (UH 3240). For undergraduate/graduate dual-level courses, submit the proposals to each office.

UOCC or Graduate Council Curriculum Chair:

[Signature]  Date  ___________ / ______ / ___________

Faculty Senate Core Curriculum Committee Chair:

[Signature]  Date  ___________ / ______ / ___________

Office of the Provost:

[Signature]  Date  ___________ / ______ / ___________

Registrar's Office:

[Signature]  Date  ___________ / ______ / ___________

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.