The University Of Toledo
COLLEGE OF
GRADUATE STUDIES
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/Numeric*: RESM 8320
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:

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):

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.

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

Course Title:
Credit Hours: 3
CrossListings:

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

C or Better in RESM 5110/7110
Catalog Description (only if changed):

□ US Culture □ Non-US Culture
□ Transfer Module: □ Arts & Humanity □ Engl □ Math
□ Social Science □ Natural Science & Physics

Reason for change*

http://curriculumtracking.utoledo.edu/CourseMod.aspx
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: __________________________  Date: ____________

Department Chairperson: __________________________  Date: ____________

College Curriculum Authority: __________________________  Date: ____________

College Dean: __________________________  Date: ____________

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.

UUCC or Graduate Council Curriculum Chair: __________________________  Date: ____________

Faculty Senate Core Curriculum Committee Chair: __________________________  Date: ____________

Office of the Provost: __________________________  Date: ____________

Registrar’s Office: __________________________  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.

http://curriculumtracking.utoledo.edu/CourseMod.asp