The University Of Toledo

Existing Course Modification Form

Please enter the changes below to each existing course. If changes are too extensive for this format, attach a page with all information.

College: ARS
Dept/Academic Unit: ECON
Contact Person: Kevin Egan Phone: 530-4148 Email: Kevin.Egan@utoledo.edu

Present

Supply all information asked for in this column.

(Supply core and transfer module info if applicable.)

Course Alpha/Numeric: ECON 5120
Course Title: MONETARY THEORY
Credit Hours: 3
CrossListings:
Prerequisite(s):

Catalog Description (only if changed):

Proposed

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

Course Alpha/Numeric: ECON -
Course Title:
Credit Hours: 4
CrossListings:
Prerequisite(s):

Catalog Description (only if changed):

Univ Core: Eng Hum Math Sci Soc Sci
US Culture Non-US Culture
Transfer Module: Arts & Humanity Eng Math
Social Science Natural Science & Physics

Reason for change

This allows the instructor to present graduate students with more advanced technical and empirical analysis. Because this more advanced material will not be presented to the undergraduates in ECON 4450, this change will provide a structural difference between the requirements of these

Has course content changed? No Yes If so, give a brief topical outline of the revised course below:

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.
List any course or courses to be dropped: ________________________________

Effective Date: __/__/____ (mm/dd/yyyy)

Approval:

Department Curriculum Authority: ________________________________ Date: 9/14/11 (mm/dd/yyyy)

Department Chairperson: ________________________________ Date: 9/14/11 (mm/dd/yyyy)

College Curriculum Authority: ________________________________ Date: 9/23/11 (mm/dd/yyyy)

College Dean: ________________________________ Date: 9/26/11 (mm/dd/yyyy)

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.

UUCC or Graduate Council Curriculum Chair: ________________________________ Date: 11/15/11 (mm/dd/yyyy)

Faculty Senate Core Curriculum Committee Chair: ________________________________ Date: __/__/____ (mm/dd/yyyy)

Office of the Provost: ________________________________ Date: __/__/____ (mm/dd/yyyy)

Registrar's Office: ________________________________ Date: __/__/____ (mm/dd/yyyy)