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: LSSS

Dept/Academic Unit: ECON

Contact Person: Kristen Keith

Phone: 530-2801

Email: jkeith@utoledo.edu

Present

Supply all information asked for in this column.

(Supply core and transfer module info if applicable.)

Course Alpha/Numeric: ECON 5150

Course Title: ADVANCED MACROECONOMICS

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: 

Course Title:

Credit Hours: 4

CrossListings:

Prerequisite(s):

Catalog Description (only if changed):

□ Univ Core: Engl Hum Math Sci Soc

□ US Culture Non-US Culture

□ Transfer Module: Arts & Humanities Engl 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 4150, this change will provide a structural difference between the requirements of these two (slashed) courses.

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 __/__/____ (mm/dd/yyyy)

Department Chairperson: ____________________________ Date __/__/____ (mm/dd/yyyy)

College Curriculum Authority: ____________________________ Date __/__/____ (mm/dd/yyyy)

College Dean: ____________________________ Date __/__/____ (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 (UH3240). For undergraduate/graduate dual-level courses, submit the proposals to each office.

UUCC or Graduate Council Curriculum Chair: ____________________________ Date __/__/____ (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)

Approve Course Modification