CBM003 Add/Change Form

UL 8529 05F

☐ Undergraduate Council	or Graduate/Professional Studies Council
☐ New Course ☑ Course Change	☐ New Course ☐ Course Change
Core Category: Effective Fall 2006	Effective Fall
1. Department: MCL College: CLASS	APPROVED OCT 1 9 2005
2. Person Submitting Form: <u>Dr. Glass</u> Telephone: <u>3-3049</u>	
<ul> <li>3. Course Information on New/Revised course:</li> <li>Instructional Area / Course Number / Long Course Title:</li> <li>GERM / 4391 / Professional Practicum in a German-speaking country</li> </ul>	
<ul> <li>Instructional Area / Course Number / Short <u>GERM / 4391 / PROFESSIONAL PRACTI</u></li> </ul>	<u>CUM</u>
• SCH: <u>3.00</u> Level: <u>SR</u> CIP Code: <u>160501</u>	1001 Lect Hrs: O Lab Hrs: 3
4. Justification for adding/changing course: To reflect change in prerequisite course	
<ul> <li>5. Was the proposed/revised course previously offered as a special topics course?  Yes No If Yes, please complete:</li> <li>• Instructional Area / Course Number / Long Course Title:</li> <li>///</li></ul>	
Content ID: Start Date (yyyy3):	
6. Is this course offered for undergraduate credit only? ⊠ Yes □ No	
<ul> <li>7. Authorized Degree Program(s): GERMAN / GERMAN AREA STUDIES</li> <li>• Does this course affect major/minor requirements in the College/Department?  ☐ Yes ☐ No</li> <li>• Does this course affect major/minor requirements in other Colleges/Departments? ☐ Yes ☐ No</li> <li>• Are special fees attached to this course? ☐ Yes ☐ No</li> <li>• Can the course be repeated for credit? ☐ Yes ☐ No</li> </ul>	
8. Grade Option: Letter (A, B, C) Instru	ection Type: practicum
<ol> <li>If this form involves a change to an existing course, please obtain the following information from the course inventory: Instructional Area / Course Number / Long Course Title</li> <li>GERM / 4391 / PROFESSIONAL PRACTICUM IN A GERMAN SPEAKING COUNTRY</li> </ol>	
• Start Date (yyyy3): 19994 Content I.D.:	: <u>25579</u>
in field of study in selected businesses in Germ practical experience.	ent of instructor Description (30 words max.): Hands-on work nan-speaking countries. Written report to evaluate and integrate
11. Dean's Signature: Most	Date: 9/8/05
Print/Type Name: Sarah Fishman	/

Zeus 9/15/05