Course Change Request

Check Appropriate Boxes: Undergraduate credit [✓] Graduate credit [ ] Professional credit [ ]

1. School/Division: Visual and Performing Arts

2. Academic Subject Code: MUS

3. Current Course Number: L424

4. Current Credit Hours: 1 - 2

5. Current Title: Music Therapy Internship

6. Effective Semester/Year for changes listed below: Fall 2009

7. Instructor: Jackson, Farlow

Type of Change Requested (Check appropriate boxes and indicate changes)

☐ 8. Change course number to: __________________________ (must be cleared with University Enrollment Services)

☐ 9. Current course title: Music Therapy Internship

Change to: __________________________________________

Recommended abbreviation (optional) ____________________________

(Limited to 32 Characters including spaces)

☐ 10. Current credit hours fixed at: __________________________ or variable from: _______ 1 _______ to _______ 2 _______

Change to credit hours fixed at: _______ 1 _______ or variable from: _______ to _______

☐ 11. Current lecture contact hours fixed at: __________________________ or variable from: _______ to _______

Change to lecture contact hours fixed at: _______ or variable from: _______ to _______

☐ 12. Current non-lecture contact hours fixed at: __________________________ or variable from: _______ to _______

Change to nonlecture contact hours fixed at: _______ or variable from: _______ to _______

☐ 13. Is this course currently graded with S-F (only) grades? Yes _______ No _______

Change to S-F (only) grading? Yes _______ No _______

☐ 14. Does this course presently have variable title approval? Yes _______ No _______

Is variable title approval being requested? Yes _______ No _______

☐ 15. Is this course being discontinued? For all campuses _______ or for this campus only _______

☐ 16. Current course description

__________________________________________________________

Change course description to (not to exceed 50 words)

__________________________________________________________

17. Justification for change: Course (internship) cannot be done in 1 semester; 2 credit option not necessary

(Use additional paper if necessary)

18. Are the necessary reading materials currently available in the appropriate library? Yes _______ No _______

19. A copy of every new course proposal must be submitted to departments, schools, or divisions in which there may be overlap of this course with existing courses or areas of strong concern, with instructions that they send comments directly to the originating Curriculum Committee. Please append a list of departments, schools, or divisions thus consulted.

Submitted by: __________________________

Department Chairman/Division Director __________________________

Date 10-16-08

Approved by: __________________________

Dean of Graduate School (when required) __________________________

Date

Chancellor/Vice-President __________________________

Date

University Enrollment Services __________________________

Date

After School/Division approval, forward the last copy (without attachments) to University Enrollment Services for initial processing, and the remaining four copies and attachments to the Campus Chancellor or Vice-President.

UPE 725 University Enrollment Services Final-White; Chancellor/Vice-President-Blue; School/Division-Yellow;

Department/Division-Pink; University Enrollment Services Advance-White