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Course Proposal: Modify Course

This proposal will change the following elements of the course.

 **Course Description**

1. Course prefix and number: **PHY 315**

2. Effective Term/Year: **FALL 2013**

3. CIP CODE/10 digit program code:  **No Change**

4. Short Course Title: **A, B. Selected Topics**

 Modified Short Course Title: **NA**

5. What is the primary reason you are modifying this course?

 **We want the instructor to decide on who may take this course.**

6. Enter course description exactly as it now appears in the general/graduate bulletin.

 **A, B. Selected Topics - One to four hours. Material covered varies from semester to semester and will be announced. May be repeated for additional credit in a different topic. Prerequisite: eight hours from any of the sciences.**

 Enter modified course description exactly as it will appear in the general/graduate bulletin?

 **A, B. Selected Topics - One to four hours. Material covered varies from semester to semester and will be announced. May be repeated for additional credit in a different topic. Prerequisite: consent of the instructor.**

7. Current Prerequisites:

 **Prerequisite: eight hours from any of the sciences.**

 Modified Course Prerequisites:

 **Prerequisite: consent of the instructor.**

8. College: **College of Science and Mathematics**

9. Department Teaching Course: **Physics and Astronomy**

10a. Instruction Type: **Lecture** **No Change**

10b. Credit Hours: **No Change**

 Current - Maximum: Minimum: Maximum Hours counted toward degree:

 Modified- Maximum: Minimum: Maximum Hours counted toward degree:

11a. Second Instruction Type: **ns** **No Change**

11b. Second Credit Hours: **No Change**

 Current - Maximum: Minimum: Maximum Hours counted toward degree:

 Modified- Maximum: Minimum: Maximum Hours counted toward degree:

12. Maximum contact hours each week fall semester: **No Change**

 Lecture: Lab: Other:

13. May this course be taken more than one time each semester: **No**

14. Grade Type: **No Change**

15. Describe the place of the modified course within your current curriculum. Will it be elective or required? Part of a major or a minor? (Enter NA if no change is being made.) **NA**

16. How does the modified course differ from similar courses being offered at Stephen F. Austin?(Enter NA if no change is being made.)**NA**

17. Syllabus: Course Learning Goals

 List course objectives; describe what students who complete the course will know or be able to do. (Enter NA if no change is being made.) **NA**

18. Syllabus: Course Outline

 List the topics that the modified course will cover and indicate the approximate proposed amount of time to be devoted to each, either by percent of course time or number of weeks. Please indicate which topics will be required in all sections of the course and which may vary. (Enter NA if no change is being made.) **NA**

19. Syllabus: Modified Textbook/Assigned Reading Materials for course. **NA**

20. Any Other Information **NA**



 Dept. Chair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_9-24-12\_\_\_\_\_\_\_\_\_\_\_

 College Curriculum Chair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 College Dean \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Grad Dean/Univ Curr Chair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

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