Top of Form

Course Proposal: Modify Course

This proposal will change the following elements of the course.

**Prerequisites**

1. Course prefix and number: **CHE 302**

2. Effective Year/Term: **FALL 2012**

3. CIP CODE/10 digit program code: **4005010002**

4. Short Course Title: **Fundamental Applications of Chemistry**

Modified Short Course Title: **NA**

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

**The current prerequisites for CHE 302 are unnecessary and complicate the registration process. This course was designed specifically for those students wanting to teaching in the elementary/middle school grades. It is assumed that the students in CHE 302 have no prior knowledge in chemistry making any prerequisites unnecessary. During the past several years, there have been a number of students (transfer students or ones who have changed their majors) that have not met the current prerequisites but were very successful in the course. We are requesting permission to eliminate all current prerequisites for CHE 302.**

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

**Presentation of the applications of chemistry and chemical principles to everyday life with an emphasis on hands-on investigations. May not be used to meet graduation requirements by students majoring/minoring in the College of Sciences and Mathematics.**

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

**NA**

7. Current Prerequisites:

**CHE 125, PHY 125, or consent of instructor.**

Modified Course Prerequisites:

**deleting all prerequisities**

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

9. Department Teaching Course: **Chemistry**

10. Credit Hours:

Current - Maximum: **4** Minimum: **4** Maximum Hours counted toward degree: **4**

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

11. Maximum contact hours each week fall semester Lecture: **3** Lab: **2** Other:

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

13. Grade Type: **Regular: A-F**

14. Instruction Type: **Lecture**

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**

Dept. Chair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

Bottom of Form