

 <b>FLORIDA ATLANTIC UNIVERSITY</b>	<b>COURSE CHANGE REQUEST</b> <b>Graduate Programs</b>		UGPC Approval _____ UFS Approval _____ SCNS Submittal _____ Confirmed _____ Banner Posted _____ Catalog _____
	Department _____ College _____		
<b>Current Course Prefix and Number</b>		<b>Current Course Title</b>	
<i>Syllabus must be attached for <b>ANY</b> changes to current course details. See <a href="#">Guidelines</a>. Please consult and list departments that may be affected by the changes; attach documentation.</i>			
<b>Change title to:</b>  <b>Change prefix</b> <b>From:</b> <b>To:</b>  <b>Change course number</b> <b>From:</b> <b>To:</b>  <b>Change credits*</b> <b>From:</b> <b>To:</b>  <b>Change grading</b> <b>From:</b> <b>To:</b>  *Review <a href="#">Provost Memorandum</a>		<b>Change description to:</b>  <b>Change prerequisites/minimum grades to:</b>  <b>Change corequisites to:</b>  <b>Change registration controls to:</b>  Please list existing and new pre/corequisites, specify AND or OR and include minimum passing grade.	
<b>Effective Term/Year for Changes:</b>		<b>Terminate course? Effective Term/Year for Termination:</b>	
<b>Faculty Contact/Email/Phone</b>			
<b>Approved by</b> Department Chair _____ College Curriculum Chair _____ College Dean _____ UGPC Chair _____ UGC Chair _____ Graduate College Dean _____ UFS President _____ Provost _____			<b>Date</b> _____ _____ _____ _____ _____ _____ _____

Email this form and syllabus to [UGPC@fau.edu](mailto:UGPC@fau.edu) one week before the UGPC meeting.