



FLORIDA
ATLANTIC
UNIVERSITY

COURSE CHANGE REQUEST Undergraduate Programs

Department Exercise Science & Health Promotion
College College of Education

UUPC Approval 4/29/19
UFS Approval _____
SCNS Submittal _____
Confirmed _____
Banner Posted _____
Catalog _____

**Current Course
Prefix and Number**

HSC 4664

Current Course Title

Community Health Campaigns & Communication

Syllabus must be attached for ANY changes to current course details. See [Checklist](#). Please consult and list departments that may be affected by the changes; attach documentation.

Change title to:

Change description to:

Change prefix

From: _____ To: _____

Change course number

From: _____ To: _____

Change credits*

From: _____ To: _____

Change grading

From: _____ To: _____

Change WAC/Gordon Rule status**

Add Remove

Change General Education Requirements***

Add Remove

*Review [Provost Memorandum](#)

**WAC/Gordon Rule criteria must be indicated in syllabus and approval attached to this form. See [WAC Guidelines](#).

***General Education criteria must be indicated in syllabus and approval attached to this form. See [GE Guidelines](#).

Change prerequisites/minimum grades to:

Change corequisites to:

Change registration controls to:

Please list existing and new pre/corequisites, specify AND or OR and include minimum passing grade (default is D-).

**Effective Term/Year
for Changes:**

**Terminate course? Effective Term/Year
for Termination:** Spring 2020

Faculty Contact/Email/Phone Dr. Michael Whitehurst / whitehur@fau.edu / 561-297-2317

Approved by

Department Chair *M Whitehurst*

College Curriculum Chair *[Signature]*

College Dean *[Signature]*

UUPC Chair *[Signature]*

Undergraduate Studies Dean *[Signature]*

UFS President _____

Provost _____

Date

3/18/19

3/25/19

3/26/19

4/29/19

5/8/19

Email this form and syllabus to mjenning@fau.edu seven business days before the UUPC meeting.