



FLORIDA  
ATLANTIC  
UNIVERSITY

## COURSE CHANGE REQUEST Undergraduate Programs

Department Biological Sciences  
College CESCOS

UUPC 12/12/16 Approval  
UFS Approval  
SCNS Submittal \_\_\_\_\_  
Confirmed \_\_\_\_\_  
Banner Posted  
Catalog \_\_\_\_\_

**Current Course**

Prefix and Number **PCB 3063**

**Current Course Title**

**Genetics**

*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.  
No other departments are affected*

**Change title 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 description to:**

**Change prerequisites/minimum grades to:**

Change prerequisites to BSC 1010 and CHM 2045

**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 Date Spring 2017**

(TERM & YEAR)

**Terminate course**

List final active term

Faculty Contact/Email/Phone David Binninger/binninge@fau.edu/7-3323

**Approved by**

Department Chair

*[Handwritten signatures]*

College Curriculum Chair

College Dean

UUPC Chair

Undergraduate Studies Dean

UFS President

Provost

**Date**

11-4-16

12/9/16

12/9/16

12/11/16

12/14/16

Email this form and syllabus to [mjenning@fau.edu](mailto:mjenning@fau.edu) seven business days before the UUPC meeting.