|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FLORIDA ATLANTIC UNIVERSITY** | **COURSE CHANGE REQUEST**  **Undergraduate Programs** | | | UUPC Approval \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  UFS Approval \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  SCNS Submittal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Confirmed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Banner Posted \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Catalog \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Department :Social Work**  **College: CDSI** | | |
| ***Current* Course  Prefix and Number SOW 3302** | | ***Current* Course Title: Profession of Social Work** | | |
| *Syllabus must be attached for* ***ANY*** *changes to current course details. See* [*Checklist*](http://www.fau.edu/academic/registrar/UUPCinfo)*. Please consult and list departments that may be affected by the changes; attach documentation.* | | | | |
| **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](https://www.fau.edu/provost/resources/files/policy-and-procedures-def-of-credit-hour-7-29-15.pdf)  \*\*WAC/Gordon Rule criteria must be indicated in syllabus and approval attached to this form. See [WAC Guidelines](http://www.fau.edu/WAC/). \*\*\*General Education criteria must be indicated in syllabus and approval attached to this form. See [GE Guidelines](http://www.fau.edu/ugstudies/NewGeneralEdCurriculum.php). | | | **Change description to:       Change prerequisites/minimum grades to:  Social Work majors only. Writing Competency Exam required before registration.   Change co requisites 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 Summer, 2017** *(term & year)* | | | **Terminate course  List final active term** | |
| **Faculty Contact/Email/Phone** | | | | |
| ***Approved by*** | | | | ***Date*** |
| Department Chair | | | |  |
| College Curriculum Chair | | | |  |
| College Dean | | | |  |
| UUPC Chair | | | |  |
| Undergraduate Studies Dean | | | |  |
| UFS President | | | |  |
| Provost | | | |  |

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