## **COURSE CHANGE REQUEST Undergraduate Programs** Department Biomedical Science

SCNS Submittal \_\_\_\_\_ Confirmed \_\_

UUPC Approval \_\_\_\_\_

UFS Approval \_\_

ATLANTIC

UNIVERSITY	College Medicine			Catalog
Current Course Prefix and Num Syllabus must be at		se Title Radiation Biology ails. See <u>Checklist</u> . 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:	Cl	hange prerequisites/	minimum grades to:
Change credits*				
From:	To:			
Change grading			Change corequisites to:	
From:	То:			
Change WAC/Gordon Rule status**				
Add Remove			Change registration controls to:	
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 <u>WAC Guidelines</u> .  General Education criteria must be indicated in syllabus and approval attached to this form. See <u>GE Guidelines</u> .			Please list existing and new pre/corequisites, specify AND or OR and include minimum passing grade (default is D-).	
Effective Term/Year			Terminate course? Effective Term/Year	
for Changes: for Termination: Fall 2018  Faculty Contact/Email/Phone Marc Kantorow mkantoro@bealth fau edu 561-297-2910				
Marc Nantolow Inkantologicalit.iau.edu 301-297-2910				
Approved by  Department Chair  College Curriculum Chair  College Dean				10-8-18 10/8/18 10/8/18
UUPC Chair				
Undergraduate Studies Dean				
UFS President				

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