



FLORIDA
ATLANTIC
UNIVERSITY

COURSE CHANGE REQUEST Undergraduate Programs

Department **Biological Science**
College **Charles E Schmidt College of Science**

UUPC Approval 11/14/16
UFS Approval _____
SCNS Submittal _____
Confirmed _____
Banner Posted _____
Catalog _____

Current Course

Prefix and Number **OCE 4006**

Current Course Title: **Marine Science**

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:

CHM 2045 Minimum Grade of C-, and CHM 2045L Minimum Grade of C-, and CHM 2046 Minimum Grade of C-, and CHM 2046L Minimum Grade of C-

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

(TERM & YEAR) **SPRING 2017**

Terminate course

List final active term

Faculty Contact/Email/Phone

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Approved by

Department Chair [Signature]

College Curriculum Chair [Signature]

College Dean [Signature]

UUPC Chair [Signature]

Undergraduate Studies Dean [Signature]

UFS President _____

Provost _____

Date

11-9-16

11/9/16

11/14/16

11/15/16

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