

1. Proposal Summary

(Summary is generally less than one page. Briefly: state what is proposed with a summary of rationale and highlights. Additional rationale may be attached.)

BIOL 492 - Biology Internship currently requires students to invest at least 45 hours per credit registered. Students enrolled in this course are also currently required to take daily notes and write a final report both of which are graded by the instructor. The instructor also drafts an evaluation based on interviews with site supervisors. Yet, Biology Internship is currently offered as a credit-no credit course. The purpose of this proposal is to request a change to normal grading. Assigning students grades will offer an incentive for students to excel and reward those that have surpassed expectations.

2. Summary of All Course Action Required*

a. Newly Created Courses to FSU:

Prefix	Number	Title
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b. Courses to be Deleted From FSU Catalog:

Prefix	Number	Title
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c. Existing Course(s) to be Modified:

Prefix	Number	Title
BIOL	492	Biology Internship

d. Addition of existing FSU courses to program

Prefix	Number	Title
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e. Removal of existing FSU courses from program

Prefix	Number	Title
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*Contact Senate Secretary or UCC Chair if spaces for additional courses are needed.

MODIFY COURSE
Course Data Entry Form

FORM F

Modify Course
Rev. 07/23/07

I. ACTION TO BE TAKEN: MODIFY AN EXISTING COURSE

Notes:

1. Complete all parts of Sections I and II; complete only those items in Section III that represent changes.
2. If either prefix or number is being changed, use 'Delete Course' and 'Create New Course' forms rather than this form.

a. List the changes to be made (See Proposed Changes a through p below):

b. Term Effective (6 digit code only): Examples: 200801(Spring), 200805(Summer), 200808(Fall)
Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. CURRENT: Include information that is in the current course database.

a. Course Prefix b. Number c. Enter Contact Hours per week in boxes.
LECTure LAB INDEpendent Study – Check (x)
Practicum: Seminar:

d. Course Title:

III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in Section I. Leave all other spaces blank.

a. Course Prefix b. Number c. Enter Contact Hours per week in boxes.
LECTure LAB INDEpendent Study – Check (x)
Practicum: Seminar:

d. Course Title: (Limit to 30 characters/spaces.)

e. College Code: f. Department Code:

Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.

g. Type: Variable Fixed h. Maximum Credit Hours i. Minimum Credit Hours

j. May Be Repeated for Added Credit: Check (x) Yes No

k. Levels: Check (x) Undergraduate Graduate Professional

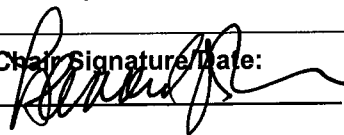
l. Grade Method: Check (x) Normal Grading Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

n. Term(s) Offered: (See instructions for listing.) o. Max. Section Enrollment:

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces.

UCC Chair Signature/Date:

 2/13/08

Academic Affairs Approval Signature/Date:

 2/14/08

To be completed by Academic Affairs Office: - Standard & Measures Coding and General Education Code

Basic Skill (BS) General Education (GE) Occupational Education (OC) G.E. Codes

Office of the Registrar use ONLY

Date Rec'd: ___ Date Completed: ___ Entered: SCACRSE ___ SCADETL ___ SCARRES ___ SCAPREQ ___