

PROPOSAL SUMMARY AND ROUTING FORM

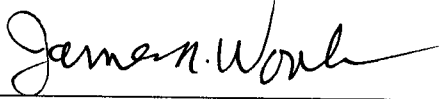
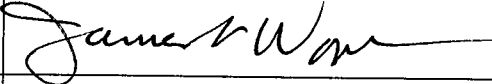
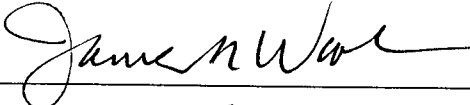
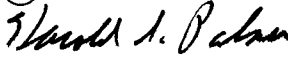
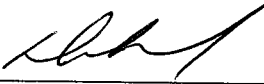
Proposal Title: ISYS 488/ISYS 489 - revision of course offering schedule, pre-requisite/co-requisite change.

Initiating Unit or Individual: AFIS Department

Contact Person's Name: Jim Woolen e-mail: woolenj phone: 2434

Date or Semester of Proposal Implementation: 07F

- Group I - A – New degree/major or major, or redirection of a current offering
- Group I - B – New minors or concentrations
- Group II - A – Minor curriculum clean-up and course changes
- Group II - B – New Course
- Group III - Certificates
- Group IV – Off-Campus Programs

Group/Individual	Signature	Date	Vote/Action*
Program Faculty		Electronic Vote over time	<u>7</u> Support <u>1</u> Support with Concerns <u>1</u> Not Support
Department Faculty		8/20/07	<u>15</u> Support <u>3</u> Support with Concerns <u>0</u> Not Support
Department Head		8/20/07	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
College Curriculum Committee		9/13/07	<u>6</u> Support <u>0</u> Support with Concerns <u>0</u> Not Support
Dean		9/13/07	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
University Curriculum Committee			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Senate			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Academic Affairs			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support

Support with Concerns or Not Support must include a list of concerns.

- Professor Palmer expressed a concern that canceling classes due to low enrollment is problematic, and that the university should understand the contribution to margin in terms of faculty CRHS production.
- Professor Kosanovich expressed a concern that not having ISYS 488/489 as compressed in the same semester would create team problems.

To be completed by Academic Affairs

 President (Date Approved) Board of Trustees (Date Approved) _____
 President's Council (Date Approved)

1. Proposal Summary

This proposal is to change semesters offered for the CIS capstone courses (ISYS 488 and ISYS 489). This is already the case for off-campus students who take ISYS 488 and ISYS 489 in a hybrid format with three Saturdays and the remainder via the Internet.

Only CIS majors will be affected as these are their capstone courses. They will be notified of the change.

The advantages to these minor changes are:

1. If the on-campus sections of ISYS 488 or ISYS 489 need to be cancelled due to low enrollment, students can be placed into the off-campus sections which meet three Saturdays on-campus with the remainder via the Internet.
2. It would enhance student ability to stay on track and not be delayed one year waiting for a course to become available.
3. It would increase student satisfaction with course scheduling since they could depend on either the on-campus or off-campus section making enrollment.

MODIFIED CIS COURSES

Minor changes are proposed for the following courses:

- ISYS 488: change to only once per year in the fall semester.
- ISYS 489: change to only once per year in the spring semester and to change the co-requisite of ISYS 488 to just ISYS 488 as a prerequisite.

CIS COURSES DELETED FROM FSU CATALOG

None

CIS COURSES REMOVED FROM PROGRAM

None

2. Summary of All Course Action Required*

a. New (N) & Replacement (R) CIS Courses:

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
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ISYS	488	Systems Design & Implementation
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ISYS	489	Advanced Systems Design & Implementation
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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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MODIFY COURSE

Course Date Entry Form

FORM F
Modify Course
rev. 9/23/02

I. ACTION TO BE TAKEN: MODIFY AN EXISTING COURSE

Notes:

1. If this course is a prerequisite for other university courses, Form Fs for those courses must also be submitted.
2. If either prefix or number is being changed, use 'Delete Course' and 'New Course' forms rather than this form.

List the changes to be made: change to offering only once per year in the fall semester and remove ISYS 489 as a co-requisite.

Term Effective: Semester Fall Year 2007 See instructions.

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

Course Prefix ISYS Number 488 Enter Contact Hours per week in boxes.
LECTure 3 LAB INDEpendent Study – Check (x)
Practicum: Seminar:

Full Course Title: Systems Design & Implementation

III. PROPOSED CHANGES (Complete only those boxes that represent proposed changes in the course. Leave all other spaces blank):

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

Full Course Title:

Abbreviated Course Title:

(Abbreviate only if necessary. Use Arabic numerals. Limit to 26 characters and spaces.)

Semester(s) Offered: (See instructions for listing.) Max. Section Enrollment:

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

Type: Variable Fixed Maximum Credit Hours Minimum Credit Hours

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

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

Levels: Check (x) Undergraduate Graduate Professional

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

Prerequisites: (if no prerequisites, write "None") Limited to 60 spaces. ISYS 330 & ISYS 371

UCC Chair Signature/Date:
Signature/Date:

Academic Affairs Approval

_____/_____/_____
_____/_____/_____

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 Received: _____ Date Completed: _____ Entered: SIS [125 ____, 1D4 ____]

MODIFY COURSE

Course Date Entry Form

FORM F
Modify Course
rev. 9/23/02

III. ACTION TO BE TAKEN: MODIFY AN EXISTING COURSE

Notes:

1. If this course is a prerequisite for other university courses, Form Fs for those courses must also be submitted.
2. If either prefix or number is being changed, use 'Delete Course' and 'New Course' forms rather than this form.

List the changes to be made: change to offering only once per year in the spring semester, and change prerequisite from a co-requisite to a prerequisite.

Term Effective: Semester Fall Year 2007 See instructions.

IV. CURRENT (Include information that is in the current course database):

Course Prefix ISYS Number 489 Enter Contact Hours per week in boxes.
 LECTure 3 LAB INDEpendent Study – Check (x)
 Practicum: Seminar:

Full Course Title: Advanced Systems Design & Implementation

IV. PROPOSED CHANGES (Complete only those boxes that represent proposed changes in the course. Leave all other spaces blank):

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

Full Course Title:

Abbreviated Course Title:

(Abbreviate only if necessary. Use Arabic numerals. Limit to 26 characters and spaces.)

Semester(s) Offered: SP (See instructions for listing.) Max. Section Enrollment :

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

Type: Variable Fixed Maximum Credit Hours Minimum Credit Hours

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

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

Levels: Check (x) Undergraduate Graduate Professional

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

Prerequisites: (if no prerequisites, write "None") Limited to 60 spaces. ISYS 488

UCC Chair Signature/Date: _____ / / _____

Academic Affairs Approval Signature/Date: _____ / / _____

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 Received: _____ Date Completed: _____ Entered: SIS [125 ____, 1D4 ____]