

PROPOSAL SUMMARY AND ROUTING FORM

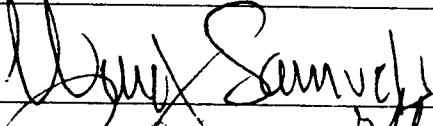
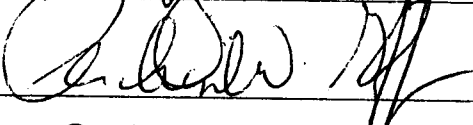
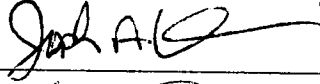
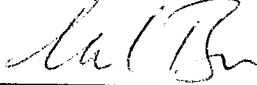
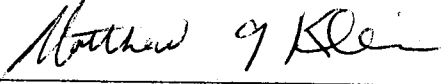

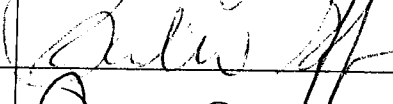
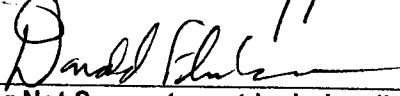
Proposal Title: Minor Change in Present Courses

Initiating Unit or Individual: Social Work Program

Contact Person's Name: Katherine Palazzolo-Miller e-mail: palazzok@ferris.edu phone: 5879

Date or Semester of Proposal Implementation: Fall 2008

- 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 or Academic Unit Faculty		9/25/07	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Department Faculty		9/24/07	13 Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Department Head		9/24/07	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
College Curriculum Committee		10/30/07	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Dean		11-8-07	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
University Curriculum Committee		11/21/07	<input checked="" type="checkbox"/> Support 6-0 <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Senate		11/27/07	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Academic Affairs		12/6/07	<input checked="" 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.

**Vote counts are to be shown for faculty group actions. "X" for administrative actions.

To be completed by Academic Affairs		
President (Date Approved)	Board of Trustees (Date Approved)	President's Council (Date Approved)

REC'D DEC 9 4 2007

1. Proposal Summary

Presently, the Social Work field courses are graded with "Credit" or "No Credit". The Social Work faculty wants to change the grading to letter-grade options.

The rationale is that "Credit" does not calculate into the student's grade point average. This would help those students who strive to make the Dean's list as well as those going on to graduate school. Our Field Instruction courses (SCWK 491 and SCWK 492) are each worth 6 credits and our first Field Experience course (SCWK 191) is worth 3 credits. The faculty feels that these are too many credits not figuring into a student's GPA.

Another issue relates to measuring performance. There are those students who do more than is required in their field work; presently, they would receive the same "Credit" as those students who do average work (e.g., just meeting the requirements). The faculty feels that the students need to receive feedback regarding the quality of their fieldwork. We also think that this will be a motivator for marginal students to work harder and achieve.

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
SCWK	191	Introductory Field Experience
SCWK	491	Field Instruction 1
SCWK	492	Field Instruction 2

d. Addition of existing FSU courses to program
Prefix Number Title

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

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

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 are being changed, use 'Delete Course' and 'New Course' forms rather than this form.

a. List the changes to be made: Changing SCWK 191 from credit/no credit to normal grading

b. Term Effective: Semester Spring '08 Year 2008 See instructions.

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

a. Course Prefix SCWK b. Number 191 c. Enter Contact Hours per week in boxes or check Independent Study (X).
 LECTure hr/week LAB hr/week INDEpendent Study
 Practicum: 3 hr/week Seminar: hr/week

d. Full Course Title: Introductory Field Experience

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

a. Course Prefix b. Number c. Enter Contact Hours per week in boxes or check Independent Study (X).
 LECTure hr/week LAB hr/week INDEpendent Study
 Practicum: hr/semester Seminar: hr/week

d. Full Course Title:

e. Abbreviated Course Title: . (Abbreviate only if necessary. Use Arabic numerals. Limit to 26 characters and spaces.)

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

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

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

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

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

n. Levels: Check (x) Undergraduate Graduate Professional

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

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

UC Chair Signature/Date:

[Signature] 12/04/07

Academic Affairs Approval Signature/Date:

[Signature] 12/6/07

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 ___ 12R ___ 131 ___]

MODIFY COURSE

Course Date Entry Form

FORM F
Modify Course
rev. 2/14/05

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 are being changed, use 'Delete Course' and 'New Course' forms rather than this form.

a. List the changes to be made: Changing SCWK 491 from credit/no credit to normal grading

b. Term Effective: Semester Spring '08 Year 2008 See instructions.

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

a. Course Prefix SCWK b. Number 491 c. Enter Contact Hours per week in boxes or check Independent Study (X).
 LECTure hr/week LAB hr/week INDEpendent Study
 Practicum: 6 hr/week Seminar: hr/week

d. Full Course Title: Field Instruction 1

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

a. Course Prefix b. Number c. Enter Contact Hours per week in boxes or check Independent Study (X).
 LECTure hr/week LAB hr/week INDEpendent Study
 Practicum: hr/semester Seminar: hr/week

d. Full Course Title:

e. Abbreviated Course Title: . (Abbreviate only if necessary. Use Arabic numerals. Limit to 26 characters and spaces.)

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

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

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

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

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

n. Levels: Check (x) Undergraduate Graduate Professional

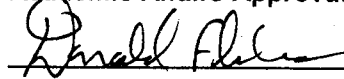
o. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

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

UCC Chair Signature/Date:

 12/4/07

Academic Affairs Approval Signature/Date:

 12/6/07

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 ___ 12R ___ 131 ___]

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 are being changed, use 'Delete Course' and 'New Course' forms rather than this form.

a. List the changes to be made: Changing SCWK 492 from credit/no credit to normal grading

b. Term Effective: Semester Spring '08 Year 2008 See instructions.

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

a. Course Prefix SCWK b. Number 492 c. Enter Contact Hours per week in boxes or check Independent Study (X).
 LECTure hr/week LAB hr/week INDEPENDENT Study
 Practicum: 6 hr/week Seminar: hr/week

d. Full Course Title: Field Instruction 2

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

a. Course Prefix b. Number c. Enter Contact Hours per week in boxes or check Independent Study (X).
 LECTure hr/week LAB hr/week INDEPENDENT Study
 Practicum: hr/semester Seminar: hr/week

d. Full Course Title:

e. Abbreviated Course Title: . (Abbreviate only if necessary. Use Arabic numerals. Limit to 26 characters and spaces.)

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

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

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

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

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

n. Levels: Check (x) Undergraduate Graduate Professional

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

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

UCC Chair Signature/Date:

[Signature] 12/04/07

Academic Affairs Approval Signature/Date:

[Signature] 12/16/07

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 ___ 12R ___ 131 ___]