

## PROPOSAL SUMMARY AND ROUTING FORM

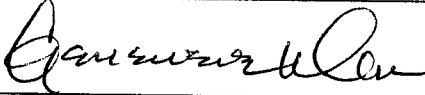
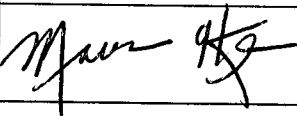
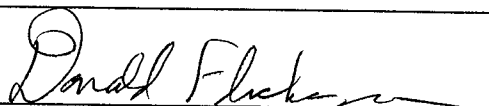
**Proposal Title:** Special Studies in French

**Initiating Unit or Individual:** Genevieve West

**Contact Person's Name:** Genevieve West e-mail: westg@ferris.edu phone: x2519

**Date or Semester of Proposal Implementation:** Summer 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			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Department Faculty			<input type="checkbox"/> 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			<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Dean		9/25/07	<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		9/24/07	<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.

<b>To be completed by Academic Affairs</b>		
President (Date Approved) _____	Board of Trustees (Date Approved) _____	President's Council (Date Approved) _____

**FORM A CONT.**

**1. Proposal Summary**

**This will create a graduate level course for Independent Studies in French. It will provide a means for students on study abroad trips to earn graduate credit for their studies. The course will be taught in the target language, French.**

**2. Summary of All Course Action Required\***

**a. Newly Created Courses to FSU:**

<b>Prefix</b>	<b>Number</b>	<b>Title</b>
<b>FREN</b>	<b>597</b>	<b>Special Studies in French.</b>

**b. Courses to be Deleted From FSU Catalog:**

<b>Prefix</b>	<b>Number</b>	<b>Title</b>
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**c. Existing Course(s) to be Modified:**

<b>Prefix</b>	<b>Number</b>	<b>Title</b>
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**d. Addition of existing FSU courses to program**

<b>Prefix</b>	<b>Number</b>	<b>Title</b>
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**e. Removal of existing FSU courses from program**

<b>Prefix</b>	<b>Number</b>	<b>Title</b>
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**\*Contact Senate Secretary or UCC Chair if spaces for additional courses are needed.**

# CREATE A NEW COURSE

## Course Date Entry Form

FORM F  
Create Course  
rev. 2/14/05

### I. ACTION TO BE TAKEN: CREATE A NEW COURSE

#### Notes

1. Complete each item in section I and section II.
2. If this course is to be used as a prerequisite for other university courses, Form Fs that reflect the prerequisite change must be submitted for those courses as well.

Term Effective: a. Semester Summer b. Year 2008 See instructions.

### II. PROPOSED FOR NEW COURSE: Complete all sections of this part through Prerequisites. See instructions in manual for further clarification.

a. Course Prefix FREN b. Number 597 c. Enter Contact Hours or check Independent Study (X).  
LECTure  hr/week LAB  hr/week INDEPENDENT Study   
Practicum:  hr/semester Seminar:  hr/week

d. Full Course Title: Special Studies in French

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

f. Semester(s) Offered: F/S/Su (See instructions for listing.) g. Max. Section Enrollment: 20

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

h. Type:  Variable  Fixed i. Maximum Credit Hours 3 j. Minimum Credit Hours 3

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. Does proposed new course replace an equivalent course? Check (x)  Yes  No

p. Equivalent course: Prefix  Number  See instructions on Replacement courses.

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

Special Studies in French taught in the target language. Graduate credit.

r. Prerequisites: (if no prerequisites, write "None") Limited to 60 spaces. Permission of the instructor required.

UCC Chair Signature/Date: \_\_\_\_\_

Academic Affairs Approval Signature/Date: \_\_\_\_\_

*Donald Flaherty 9/28/07*

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 \_\_\_]

## College of Arts and Sciences

September 25, 2007

**TO: Thomas Oldfield, Vice President of Academic Affairs**

**FR: Matthew A. Klein, Dean**

**RE: FREN 597 – Special Studies in French**

Enclosed for your information is the proposal for FREN 597 – Special Studies in French which I have approved to be offered Summer 2008 by the Languages and Literature Department.

Thank you.

Cc: Genevieve West  
Valerie Greenfield

REC'D SEP 27 2007