

Revised 7/23/07

PROPOSAL SUMMARY AND ROUTING FORM

Proposal Title: Independent Study

Initiating Unit or Individual: Master of Science in Criminal Justice Administration

**Contact Person's Name: Nancy Hogan, Graduate Coordinator e-mail: hogann@ferris.edu
phone: x2664**

Date or Term of Proposal Implementation: Spring, 2009

- Group I - A – New degree/major or major, redirection of a current offering, or elimination of a degree, major or minor
- 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	<i>N Hogan</i>	10-10-08	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Department Faculty	<i>N Hogan</i>	10-12-08	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support 9-0
Department Head	<i>Frank Owe</i>	10/14/08	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
College Curriculum Committee	n/a		<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Dean	<i>Muhallab</i>	10/16/08	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
University Curriculum Committee	n/a		<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Senate	n/a		<input type="checkbox"/> Support <input type="checkbox"/> Support with Concerns <input type="checkbox"/> Not Support
Academic Affairs	<i>Danell</i>	10/22/08	<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 specific concerns. Votes must be shown for faculty groups. Administrators check appropriate action taken.

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

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.)

Occasionally students request to do an independent study of a specialized topic. With permission of the graduate program coordinator, students may work with a faculty member exploring a specific area of study not normally provided by the curriculum.

2. Summary of All Course Action Required*

a. Newly Created Courses to FSU:

Prefix	Number	Title
Crim	697	Independent Study

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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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.

CURRICULUM CONSULTATION FORM

For proposals affecting graduate and professional curricula

1. This completed form should be forwarded with the proposal to the chair of the University Graduate and Professional Council.
2. The University Graduate and Professional Council must respond within 20 calendar days of receipt of this form to insure inclusion in the final proposal. The completed form is returned to the initiator and inserted into the proposal.

Failure to respond is interpreted as support for the proposal.

3. The Proposing Department must respond to any concerns by the Council. This response will be in writing and be included in the proposal following the consultation form.

RE: Proposal Title Independent Study, Crim 697

Initiator(s): Criminal Justice Administration

Proposal Contact: Nancy Hogan, Graduate Program Coordinator **Date Sent:** 10-31-07

Department: School of Criminal Justice **Campus Address:** 525 Bishop Hall
(Please print)

Response from: Graduate and Professional Council

Chair: Woop

Date Returned: 10-15-08

Based upon Graduate and Professional Council review on _____(date), we

- Support the above proposal.
- Support the above proposal with the modifications and concerns listed below.
- Do not support the proposal for the reasons listed below.

Comment regarding the impact this proposal has on graduate and professional program issues at the university. Use additional pages, if necessary.

NEW COURSE INFORMATION FORM

Course Identification:

Prefix:	Number	Title
Crim	697	Independent Study

Course Description:

This special studies course has been designed to allow graduate students to work closely with a faculty member to pursue a topic of specialized interest. Topics for study and project requirements will be negotiated jointly between the faculty member and the graduate student. Typically offered by demand with approval of the graduate coordinator. 1-6 graduate credit hours.

Course Outcomes and Assessment Plan:

Determined by the project.

Course Outline including Time Allocation:

Determined by the project.

CREATE NEW COURSE
Course Data Entry Form

FORM F

Create New Course
Rev. 07/23/07

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 (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. PROPOSED FOR NEW COURSE: Complete all sections a through r. See manual for clarification.

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: COEHS f. Department Code:

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

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

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

k. Levels: Check (x) Undergraduate Graduate Professional

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

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

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

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


This special studies course has been designed to allow graduate students to work closely with a faculty member to pursue a topic of specialized interest. Topics for study and project requirements will be negotiated jointly between the faculty member and the graduate student. Typically offered by demand. 1-6 graduate credit hours.

p. Term(s) Offered: (See instructions for listing.) q. Max. Section Enrollment:

r. Prerequisites/Co-requisites/Restrictions: (If none, leave blank.) Limited to 100 spaces.

UCC Chair Signature/Date: _____

Academic Affairs Approval Signature/Date:

 10/20/08

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 __ SCADTL __ SCARRES __ SCAPREQ __