Proposal to Change Degree Requirements For the Major

NOTE: All gray text boxes must be completed (even if you just put N/A into them), otherwise the committee must consider the form incomplete.

Contact person Godwin O. Uwah  Email address UwahG@cofc.edu Phone 953-5723

1. Department: French, Francophone & Italian Studies

2. Degree: B.A.

3. Semester and year in which degree change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if the change includes deleting courses from the inventory, a Delete Course form must also be completed for each course, the Curriculum Committee does not assume the responsibility to delete the course):

   Inclusion of following sentence under Major Requirements (following existing paragraph):

   French majors will take a proficiency exam in their last year prior to graduation. Information about the nature of the exam and the schedule for each semester is available on the website.

5. Justification for Change(s):

   The Strategic Plan calls for improving our students’ proficiency in world languages. In keeping with that goal, the department of French, Francophone and Italian Studies will be assessing our majors’ proficiency in French using the nationally recognized exam, the Oral Proficiency Interview of American Council on the Teaching of Foreign Languages.

6. Does the change include deleting or adding courses from other departments? If yes, what department/program? Please contact the department chair/program director and request a note or email that they are aware of the proposed change and include that note with the proposal.

   No
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6. Signature of Department Chair (s) or Program Director(s):
   __________________________________________ Date: ________________
   __________________________________________ Date: ________________

7. Signature of Dean(s) of School:
   __________________________________________ Date: ________________
   __________________________________________ Date: ________________

8. Signature of Provost:
   __________________________________________
   Date: _________________________

9. Signature of Curriculum Committee Chair:
   __________________________________________
   Date: _________________________

10. Signature of Budget Committee Chair:
    __________________________________________
    Date: _________________________

11. Signature of Academic Planning Committee Chair:
    __________________________________________
    Date: _________________________

12. Signature of Faculty Senate Secretary:
    __________________________________________
    Date approved by Senate: _________________________

Completed form should be sent by the Faculty Senate Secretary to the Registrar. After implementation, information concerning the passed course and program changes will be provided by the Registrar to all faculty and staff on campus.