Proposal to Change Degree Requirements for a Minor/Concentration/Track

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 Douglas Friedman  Email address friedmand@cofc.edu Phone 3-5701

1. Department(s) or School(s): International Studies - LCWA

2. Name of the minor/concentration/track: Africa Concentration

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):
   Add courses to the Africa concentration in the International Studies major:
   ARTH 210 African Art
   FREN 452 Literature of the Maghreb

5. Justification for Change(s):
The International Studies/Africa concentration is an interdisciplinary/multi-disciplinary program of study that seeks to offer students a wide variety of courses focused on Africa in a structured program. The courses we seek to add enhances and broadens the content of the concentration.

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.
Art History Department
French Department
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6. Signature of Department Chair or Program Director:

______________________________________________________________

Date: ________________________

7. Signature of Dean of School:

______________________________________________________________

Date: ________________________

8. Signature of Provost:

______________________________________________________________

Date: ________________________

9. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: ________________________

10. 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.