Proposal to Change a Course

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. Course Number and Title:FREN320

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Prerequisites: FREN 313 and FREN 314 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: ________________________

9. Signature of Dean of School:

______________________________________________________________

Date: ________________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: ________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN321

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):
   Catalog change:
   Prerequisites: FREN 313 and FREN 314 or permission of the instructor.

5. Justification for Change(s):
   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) [ ] yes [X] no
   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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

This form was approved by FCC on 8/17/2010 and replaces all others.
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

   ________________________________________________________________

   Date: ______________________

9. Signature of Dean of School:

   ________________________________________________________________

   Date: ______________________

10. Signature of Curriculum Committee Chair:

    ________________________________________________________________

    Date: ______________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN326

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Prerequisites: FREN 313 and FREN 314 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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

This form was approved by FCC on 8/17/2010 and replaces all others.
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: ________________________

9. Signature of Dean of School:

______________________________________________________________

Date: ________________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: ________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN327

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Prerequisites: FREN 313 and FREN 314 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes  ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:


Date: ______________________

9. Signature of Dean of School:


Date: ______________________

10. Signature of Curriculum Committee Chair:


Date: ______________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN341

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Prerequisites: FREN 313 and FREN 314, and one course from the following sequence FREN 320, 321 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) [ ] yes  ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: _______________________________

9. Signature of Dean of School:

______________________________________________________________

Date: _______________________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: _______________________________

11. 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.

This form was approved by FCC on 8/17/2010 and replaces all others.
Proposal to Change a Course

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. Course Number and Title: FREN360

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Add Prerequisite: FREN 202 or 250 or permission from instructor

5. Justification for Change(s):

   This travel course had no prerequisites listed. For consistency we’re updating the requirements.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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

This form was approved by FCC on 8/17/2010 and replaces all others.
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

________________________________________

Date: __________________________

9. Signature of Dean of School:

________________________________________

Date: __________________________

10. Signature of Curriculum Committee Chair:

________________________________________

Date: __________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN363

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Delete Prerequisite: “Junior standing or departmental approval”

   Add Prerequisite: “FREN 202 or 250 or permission from instructor”

5. Justification for Change(s):

   This travel course had an obsolete requirement. For consistency we’re updating the requirements.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes   ☑ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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

This form was approved by FCC on 8/17/2010 and replaces all others.
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: ________________________

9. Signature of Dean of School:

______________________________________________________________

Date: ________________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: ________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN370

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Prerequisites: FREN 313 and FREN 314 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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

This form was approved by FCC on 8/17/2010 and replaces all others.
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

__________________________________________

Date: ________________________________

9. Signature of Dean of School:

__________________________________________

Date: ________________________________

10. Signature of Curriculum Committee Chair:

__________________________________________

Date: ________________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN380

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Prerequisites: FREN 313 and FREN 314

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

________________________________________________________________________

Date: __________________________

9. Signature of Dean of School:

________________________________________________________________________

Date: __________________________

10. Signature of Curriculum Committee Chair:

________________________________________________________________________

Date: __________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title:FREN381

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Prerequisites: FREN 313 and FREN 314

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) □ yes  ❑ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: ____________________________

9. Signature of Dean of School:

______________________________________________________________

Date: ____________________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: ____________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN382

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   - Catalog change:

   - Prerequisites: FREN 313 and FREN 314

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) □ yes  ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: _______________________

9. Signature of Dean of School:

______________________________________________________________

Date: _______________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: _______________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN390

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Prerequisites: FREN 313 and FREN 314, and one course from the following sequence FREN 320, 321, 326, 327 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN 314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary. Also the 320-327 sequence was added to provide a foundation to further study and is necessary for this course.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
8. Signature of Department Chair or Program Director:

________________________________________
Date: __________________________

9. Signature of Dean of School:

________________________________________
Date: __________________________

10. Signature of Curriculum Committee Chair:

________________________________________
Date: __________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN431

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:

   Prerequisites: FREN 313 and FREN 314, and one course from the following sequence FREN 320, 321 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN 314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary. Students will need a foundation in the analysis of literature before taking a higher-level literature course; FREN 320 & 321 provide that foundation.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) □ yes  ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: ________________________

9. Signature of Dean of School:

______________________________________________________________

Date: ________________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: ________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN434

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Prerequisites: FREN 313 and FREN 314, and one course from the following sequence FREN 320, 321 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes  ☑ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________

Date: ________________________

9. Signature of Dean of School:

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Date: ________________________

10. Signature of Curriculum Committee Chair:

______________________________

Date: ________________________

11. Signature of Faculty Senate Secretary:

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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.
Proposal to Change a Course

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. Course Number and Title:FREN443

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:
   Prerequisites: FREN 313 and FREN 314, and one course from the following sequence FREN 320, 321 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes  ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: ______________________

9. Signature of Dean of School:

______________________________________________________________

Date: ______________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: ______________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN 451

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:
   Prerequisites: FREN 313 and FREN 314, and one course from the following sequence FREN 320, 321 or permission of the instructor.

5. Justification for Change(s):

   Both FREN 313 and FREN 314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) □ yes   ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: __________________________

9. Signature of Dean of School:

______________________________________________________________

Date: __________________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: __________________________

11. 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.
Proposal to Change a Course

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. Course Number and Title:FREN452

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):
   
   Catalog change:
   Prerequisites: FREN 313 and FREN 314, and one course from the following sequence FREN 320, 321 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) ☐ yes ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

______________________________________________________________

Date: ______________________

9. Signature of Dean of School:

______________________________________________________________

Date: ______________________

10. Signature of Curriculum Committee Chair:

______________________________________________________________

Date: ______________________

11. 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.
Proposal to Change a Course

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. Course Number and Title: FREN490

3. Semester and year when the course change(s) will go into effect: Fall 2011

4. Change(s) Desired (Note: if more than 2 items listed under “Typical changes handled by this form” in Guidelines for Planning to Change a Course, then a New Course form must be completed):

   Catalog change:
   Prerequisites: FREN 313 and FREN 314, and one course from the following sequence FREN 320, 321, 326, 327 or permission of the instructor.

5. Justification for Change(s):

   Both FREN313 and FREN 314 have been restructured and will be recommended to be taken the same semester, making the prerequisite requirement change necessary.

6. Is this course to be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?
   a) □ yes  ☒ no

   b) If yes, complete the Change Degree Requirements form(s) and list the name(s) of the major, minor, concentration and/or list of approved electives here:

7. Is the course part of any other degree or program? Please consult the most up to date undergraduate catalog and search for uses of the course to see who should be contacted. 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

This form was approved by FCC on 8/17/2010 and replaces all others.  p. 1
Proposal to Change a Course

8. Signature of Department Chair or Program Director:

________________________________________________________

Date: ____________________________

9. Signature of Dean of School:

________________________________________________________

Date: ____________________________

10. Signature of Curriculum Committee Chair:

________________________________________________________

Date: ____________________________

11. 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.