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 Robert Russell  Email address russellr@cofc.edu Phone 953-6352

1. Department: Historic Preservation & Community Planning Program in the Department of Art History

2. Course Number and Title: HPCP 290-1, ST: Preservation Conservation

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):
   
   Add Prerequisite HPCP 199, Intro to Historic Preservation

5. Justification for Change(s):

   Necessary foundation for the special topic 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
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

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Contact person Robert Russell Email address russellr@cofc.edu Phone 953-6352

1. Department: Historic Preservation & Community Planning Program/Department of Art History

2. Course Number and Title: HPCP 340 ST: Preservation Project Planning

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):

   Add Prerequisites: HPCP 199, Intro to Historic Preservation and HPCP 299, Preservation Planning Studio

5. Justification for Change(s):

   These prerequisites are a necessary foundation for this special topics 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
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:

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Date: ______________________

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