Course Change Proposals for Faculty Curriculum Committee Meeting November 18, 2011

Submitted by the Department of Health and Human Performance

<table>
<thead>
<tr>
<th>FORM</th>
<th>COURSE NUMBER/NAME</th>
<th>PROPOSED CHANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>FCC COURSE FORM – Course Change</td>
<td>PEHD 100, Introduction to Fitness</td>
<td>Change title to PEAC 100, Introduction to Fitness</td>
</tr>
<tr>
<td>FCC COURSE FORM – Course Change</td>
<td>PEHD 115, Physical Conditioning and Weight Training</td>
<td>Change title to PEAC 115, Physical Conditioning and Weight Training</td>
</tr>
<tr>
<td>FCC COURSE FORM – Course Change</td>
<td>PEHD 116, Beginning Golf</td>
<td>Change title to PEAC 116, Beginning Golf</td>
</tr>
<tr>
<td>FCC COURSE FORM – Delete Course</td>
<td>PEHD 112, Beginning Gymnastics</td>
<td>Delete course</td>
</tr>
<tr>
<td>CORRECTED FCC Proposal to Change Degree Requirements</td>
<td>B.S. in Athletic Training</td>
<td>Increase credit hours to 54 from 52</td>
</tr>
</tbody>
</table>
Lynne/ Jen:

The Athletic Training documents went through the last FCC meeting, but the change in credits was erroneously listed as changing from 54-to-56, instead of 52-to-54. Dr. Rozzi got a call about the increase in credits to 56 from another committee chair, which is when she checked, recounted, and asked me to submit the revised form.

Mike
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 Susan L. Rozzi, PhD, ATC  Email address rozzis@cofc.edu Phone 953-7163

1. Department: Health and Human Performance

2. Degree: BS: Athletic Training

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):
   Increase the Bachelor of Science in Athletic Training major credit hours by two (2).

5. Justification for Change(s):
   Two proposals to increase the credit hours assigned to two existing laboratory courses (ATEP 430L and ATEP 437L) are being submitted with this proposal. Increasing the credit hours of these two required courses within the Athletic Training major will increase the major credit hours. This change increases the total credit hours required in the Athletic Training Major from 52 to 54 and allows us to continue to meet national accreditation standards as outlined by CAATE (Commission on Accreditation of Athletic Training Education)

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.

   N/A
Proposal to Change Degree Requirements For the Major

6. Signature of Department Chair(s) or Program Director(s):
   [Signature: Michael O'Keefe] Date: 10/31/11

7. Signature of Dean(s) of School:
   [Signature: James C. Welsh] Date: 11/9/11

8. Signature of Provost:
   [Signature: [Signature]] Date: 12/23/11

9. Signature of Curriculum Committee Chair:
   [Signature] Date: 

10. Signature of Budget Committee Chair:
    [Signature] Date: 

11. Signature of Academic Planning Committee Chair:
    [Signature] Date: 

12. Signature of Faculty Senate Secretary:
    [Signature] 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.
FACULTY CURRICULUM COMMITTEE COURSE FORM

Contact Name: Michael Flynn  Email: flynnmg@cofc.edu  Phone: 3-7291

Department or Program Name: Department of Health & Human Performance  School name: School of Education, Health, and Human Performance

Course Prefix, Number, and Title: PEHD 115 Physical Conditioning and Weight Training

I. CATEGORY OF REVIEW (Check all that apply)
(Note: For changes to course, if you check more than two separate changes, you must create a new course.)

NEW COURSE
☐ New Course (attach syllabus)

CHANGE COURSE
☐ Change Number
☐ Change Title
☐ Change Credits/Contact hours
☐ Prerequisite Change
☐ Edit Description

DELETE COURSE
☐ Re-activate Course
☐ Delete Course

☐ Approve for Cross-listing (attach rationale and written permission from relevant department)

☐ Intended to fulfill a General Education requirement (new courses only). If this box is checked, the course must also be submitted for review by the General Education Committee using this form.

Date (Semester/Year) the course will first be offered: Fall 2012

What are the prerequisites AND OTHER RESTRICTIONS (e.g., class level, major, co-requisite, credit for a mutually exclusive course)?

There are no prerequisites or other restrictions.

II. NUMBER OF CREDITS and CONTACT HOURS per week

A. Contact Hours

Lecture 2.5 hours
Lab
Seminar
Ind. Study

B. Credit Hours 2 credits

Is this course repeatable? ☐ yes ☑ no  If so, how many credit hours may the student earn in this course?
III. CATALOG DESCRIPTION Limit to 50 words EXACTLY as you want it to appear in the catalog; include prerequisites, co-requisites, and other restrictions.

A course designed to teach the accepted methods of developing and maintaining physical fitness. Consideration will be given to diet, nutrition, posture, physical form and the role of resistance exercise in the improvement of physical fitness.

IV. RATIONALE or JUSTIFICATION: If course change or deletion—please provide reasons for change(s) to or deletion of a course. If a new course—briefly address the goals/objectives for the course, how the course supports a major or minor program, etc. For non-major courses address how the course supports the liberal arts tradition and the mission of the institution.

This course is offered to CofC students as a service course and is not required for any majors in Health and Human Performance. We wish to differentiate activity courses from courses offered in our department that are required for the major. Non-majors frequently enroll for our 200 level PEHD courses under the assumption that they are enrolling for an activity course.

V. STUDENT LEARNING OUTCOMES and ASSESSMENT

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<th>Student Learning Outcomes</th>
<th>Assessment Method and Performance Expected</th>
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<td>What will students know and be able to do when they complete the course?</td>
<td>How will each outcome be measured? Who will be assessed, when, and how often? How well should students be able to do on the assessment?</td>
</tr>
<tr>
<td>1. Students will have developed skills in the basic conditioning of the human body through weight training and conditioning.</td>
<td>One practical exam (skills checklist/rubric); one written assignment – designing a workout plan; one written final exam. Students must score at least 70% on all exams/assignments.</td>
</tr>
<tr>
<td>2. Students will have the knowledge to achieve health/fitness goals through improved exercise technique &amp; usage, and program design.</td>
<td>One practical exam (skills checklist/rubric); one written assignment – designing a workout plan; one written final exam. Students must score at least 70% on all exams/assignments.</td>
</tr>
</tbody>
</table>

3.
4. How does this course align with the student learning outcomes articulated for the major, program, or general education? What program-level outcome or outcomes does it support? Is the content or skill introduced, reinforced, or demonstrated in this course?

This activity course is not aligned with any general education or major program requirements. Through participation in this course, students will gain proficiency in the use of the techniques and tools of the discipline taught. The skills of the course are introduced, then reinforced and demonstrated continually throughout the semester.

VII. IMPACT ON EXISTING PROGRAMS and COURSES: Please briefly document the impact of this new/changed/deleted course on other programs and courses; if deleting a course—list all programs that include the course; if adding/Changing a course—explain any overlap with existing courses in the same or different departments.

None

VIII. COSTS ASSOCIATED WITH THE ACTION REQUESTED: List all of the new costs or cost savings, (including new faculty/staff requests, library or equipment, etc.) associated with the action requested.

None

IX. APPROVAL AND SIGNATURES

1. Signature of Department Chair or Program Director:

Date: 10/31/11

2. Signature of Academic Dean:
3. Signature of Provost: 

[Signature]

Date: __/28/11

4. Signature of Curriculum Committee Chair:

[Signature]

Date: __________

5. Signature of Faculty Senate Secretary:

[Signature]

Date: __________

Date Approved by Faculty Senate: ________________

Following Senate approval, the Faculty Senate Secretary will forward the entire packet to the Registrar.
FACULTY CURRICULUM COMMITTEE COURSE FORM

Contact Name: Michael Flynn  Email: flynnmg@cofc.edu  Phone: 3-7291

Department or Program Name: Department of Health & Human Performance  School name: School of Education, Health, and Human Performance

Course Prefix, Number, and Title: PEHD 116 Beginning Golf

I. CATEGORY OF REVIEW (Check all that apply)
(Note: For changes to course, if you check more than two separate changes, you must create a new course.)

NEW COURSE
□ New Course (attach syllabus)

CHANGE COURSE
□ Change Number
□ Change Title
□ Change Credits/Contact hours
□ Prerequisite Change
□ Edit Description

DELETE COURSE
□ Re-activate Course
□ Delete Course

□ Approve for Cross-listing (attach rationale and written permission from relevant department)

□ Intended to fulfill a General Education requirement (new courses only). If this box is checked, the course must 
also be submitted for review by the General Education Committee using this form.

Date (Semester/Year) the course will first be offered: Fall 2012

What are the prerequisites AND OTHER RESTRICTIONS (e.g., class level, major, co-requisite, credit for a mutually exclusive course)?

There are no prerequisites or other restrictions.

Will this course be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?

a) □ Yes  x □ No

b) If yes, complete and attach the CHANGE DEGREE REQUIREMENT form(s) for each affected program. List the name(s) of each program affected below:

II. NUMBER OF CREDITS and CONTACT HOURS per week

A. Contact Hours

<table>
<thead>
<tr>
<th>Lecture</th>
<th>Lab</th>
<th>Seminar</th>
<th>Ind. Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.5 hours</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B. Credit Hours 2 credits

Is this course repeatable? □ yes  x □ no  If so, how many credit hours may the student earn in this course?
III. CATALOG DESCRIPTION  Limit to 50 words EXACTLY as you want it to appear in the catalog; include prerequisites, co-requisites, and other restrictions.

The history, techniques, practice of skills and rules of golf.
Note: Lab fee required; students will need to provide their own transportation to the off-campus facility.

IV. RATIONALE or JUSTIFICATION: If course change or deletion—please provide reasons for change(s) to or deletion of a course. If a new course—briefly address the goals/objectives for the course, how the course supports a major or minor program, etc. For non-major courses address how the course supports the liberal arts tradition and the mission of the institution.

This course is offered to CofC students as a service course and is not required for any majors in Health and Human Performance. We wish to differentiate activity courses from courses offered in our department that are required for the major. Non-majors frequently enroll for our 200 level PEHD courses under the assumption that they are enrolling for an activity course.

V. STUDENT LEARNING OUTCOMES and ASSESSMENT

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<th>Assessment Method and Performance Expected</th>
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<tr>
<td>What will students know and be able to do when they complete the course?</td>
<td>How will each outcome be measured? Who will be assessed, when, and how often? How well should students be able to do on the assessment?</td>
</tr>
<tr>
<td>1. Students will learn the basic fundamental skills of golf including grip, full swing, chipping and putting.</td>
<td>Four practical exams (skills checklist/rubric). Students must score at least 70% on all exams.</td>
</tr>
<tr>
<td>2. Students will learn the rules of golf and basic golf etiquette.</td>
<td>One midterm and one final exam. Students must score at least 70% on all exams. Students will research and learn a golf drill to present and teach to the class. Students must score at least 70% on the checklist rubric for the presentation.</td>
</tr>
<tr>
<td>3. Students will learn the history of the game of golf.</td>
<td>One midterm and one final exam. Students must score at least 70% on all exams.</td>
</tr>
<tr>
<td>4.</td>
<td></td>
</tr>
</tbody>
</table>

How does this course align with the student learning outcomes articulated for the major, program, or general education? What program-level outcome or outcomes does it support? Is the content or skill introduced, reinforced, or demonstrated in this course?

This activity course is not aligned with any general education or major program requirements. Through participation in this course, students will gain proficiency in the use of the techniques and tools of the discipline.
taught. The skills of the course are introduced, then reinforced and demonstrated continually throughout the semester.

VII. IMPACT ON EXISTING PROGRAMS and COURSES: Please briefly document the impact of this new/changed/deleted course on other programs and courses; if **deleting a course**—list all programs that include the course; if **adding/changing a course**—explain any overlap with existing courses in the same or different departments.

None

VIII. COSTS ASSOCIATED WITH THE ACTION REQUESTED: List all of the new costs or cost savings, (including new faculty/staff requests, library or equipment, etc.) associated with the action requested.

None

IX. APPROVAL AND SIGNATURES

1. Signature of Department Chair or Program Director:

   [Signature]
   
   Date: 10/31/11

2. Signature of Academic Dean:

   [Signature]
   
   Date: 11/9/11

3. Signature of Provost:

   [Signature]
   
   Date: 12/28/11

4. Signature of Curriculum Committee Chair:
5. Signature of Faculty Senate Secretary:

____________________________ Date: ____________

Date Approved by Faculty Senate: ______________________________

Following Senate approval, the Faculty Senate Secretary will forward the entire packet to the Registrar.
FACULTY CURRICULUM COMMITTEE COURSE FORM

Contact Name: Michael Flynn  Email: flynnmg@cofc.edu  Phone: 3-7291

Department or Program Name: Department of Health & Human Performance  School name: School of Education, Health, and Human Performance

Course Prefix, Number, and Title: PEHD 112  Beginning Gymnastics

I. CATEGORY OF REVIEW (Check all that apply)
(Note: For changes to course, if you check more than two separate changes, you must create a new course.)

NEW COURSE

- □ New Course (attach syllabus)

CHANGE COURSE

- □ Change Number
- □ Change Title
- □ Change Credits/Contact hours
- □ Prerequisite Change
- □ Edit Description

DELETE COURSE

- □ Re-activate Course
- □ Delete Course

- □ Approve for Cross-listing (attach rationale and written permission from relevant department)

- □ Intended to fulfill a General Education requirement (new courses only). If this box is checked, the course must also be submitted for review by the General Education Committee using this form.

Date (Semester/Year) the course will first be offered:

What are the prerequisites AND OTHER RESTRICTIONS (e.g., class level, major, co-requisite, credit for a mutually exclusive course)?

There are no prerequisites or other restrictions.

Will this course be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?

- a) □ Yes  x □ No

- b) If yes, complete and attach the CHANGE DEGREE REQUIREMENT form(s) for each affected program. List the name(s) of each program affected below:

II. NUMBER OF CREDITS and CONTACT HOURS per week

A. Contact Hours

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<tr>
<td>2.5 hours</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B. Credit Hours

2 credits

Is this course repeatable? □ yes  x □ no  If so, how many credit hours may the student earn in this course?
III. CATALOG DESCRIPTION Limit to 50 words EXACTLY as you want it to appear in the catalog; include prerequisites, co-requisites, and other restrictions.

An introductory course in gymnastics. The course is designed to provide instruction in the beginning skills on the following apparatus: vault, uneven bars, balance beam and tumbling. Instruction in hand spotting various skills is also taught in this course. No prior gymnastics experience is required. NOTE: Students will need to provide their own transportation to the off-campus facility.

IV. RATIONALE or JUSTIFICATION: If course change or deletion—please provide reasons for change(s) to or deletion of a course. If a new course—briefly address the goals/objectives for the course, how the course supports a major or minor program, etc. For non-major courses address how the course supports the liberal arts tradition and the mission of the institution.

This course is no longer offered by the Department of Health and Human Performance.

V. STUDENT LEARNING OUTCOMES and ASSESSMENT

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<td>How will each outcome be measured? Who will be assessed, when, and how often? How well should students be able to do on the assessment?</td>
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How does this course align with the student learning outcomes articulated for the major, program, or general education? What program-level outcome or outcomes does it support? Is the content or skill introduced, reinforced, or demonstrated in this course?

VII. IMPACT ON EXISTING PROGRAMS and COURSES: Please briefly document the impact of this new/changed/deleted course on other programs and courses; if deleting a course—list all programs that include the course; if adding/changing a course—explain any overlap with existing courses in the same or different departments.

None
VIII. COSTS ASSOCIATED WITH THE ACTION REQUESTED: List all of the new costs or cost savings, (including new faculty/staff requests, library or equipment, etc.) associated with the action requested.

None

IX. APPROVAL AND SIGNATURES

1. Signature of Department Chair or Program Director:

[Signature]
Date: 10/31/11

2. Signature of Academic Dean:

[Signature]
Date: 11/9/11

3. Signature of Provost:

[Signature]
Date: 12/28/11

4. Signature of Curriculum Committee Chair:

[Signature]
Date:

5. Signature of Faculty Senate Secretary:

[Signature]
Date:

Date Approved by Faculty Senate: ____________________________

Following Senate approval, the Faculty Senate Secretary will forward the entire packet to the Registrar.
FACULTY CURRICULUM COMMITTEE COURSE FORM

Contact Name: Michael Flynn  Email: flynnmg@cofc.edu  Phone: 3-7291

Department or Program Name: Department of Health & Human Performance  School name: School of Education, Health, and Human Performance

Course Prefix, Number, and Title: PEHD 100  Introduction to Fitness

I. CATEGORY OF REVIEW (Check all that apply)
(Note: For changes to course, if you check more than two separate changes, you must create a new course.)

NEW COURSE
☐ New Course (attach syllabus)

CHANGE COURSE
☐ Change Number
☒ Change Title
☐ Change Credits/Contact hours
☐ Prerequisite Change
☐ Edit Description

DELETE COURSE
☐ Re-activate Course
☐ Delete Course

☐ Approve for Cross-listing (attach rationale and written permission from relevant department)

☐ Intended to fulfill a General Education requirement (new courses only). If this box is checked, the course must also be submitted for review by the General Education Committee using this form.

Date (Semester/Year) the course will first be offered: Fall 2012

What are the prerequisites AND OTHER RESTRICTIONS (e.g., class level, major, co-requisite, credit for a mutually exclusive course)?

There are no prerequisites or other restrictions.

Will this course be added to the Degree Requirements of a Major, Minor, Concentration or List of Approved Electives?

a) ☐ Yes  ☒ No

b) If yes, complete and attach the CHANGE DEGREE REQUIREMENT form(s) for each affected program. List the name(s) of each program affected below:

II. NUMBER OF CREDITS and CONTACT HOURS per week

A. Contact Hours
Lecture  2.5 hours
Lab
Seminar
Ind. Study

B. Credit Hours  2 credits

Is this course repeatable? ☐ yes  ☒ no  If so, how many credit hours may the student earn in this course?
III. CATALOG DESCRIPTION Limit to 50 words EXACTLY as you want it to appear in the catalog; include prerequisites, co-requisites, and other restrictions.

This course presents the principles and methods for developing and maintaining physical fitness. Major emphasis is on developing a personal exercise and nutrition program.

IV. RATIONALE or JUSTIFICATION: If course change or deletion—please provide reasons for change(s) to or deletion of a course. If a new course—briefly address the goals/objectives for the course, how the course supports a major or minor program, etc. For non-major courses address how the course supports the liberal arts tradition and the mission of the institution.

This course is offered to CoC students as a service course and is not required for any majors in Health and Human Performance. We wish to differentiate activity courses from courses offered in our department that are required for the major. Non-majors frequently enroll for our 200 level PEHD courses under the assumption that they are enrolling for an activity course.

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<td>How will each outcome be measured? Who will be assessed, when, and how often? How well should students be able to do on the assessment?</td>
</tr>
<tr>
<td>1. Students will master competencies to prepare them to participate regularly in bouts of exercise to build cardiorespiratory stamina.</td>
<td>Students will maintain fitness logs including skills objectives, fitness assessments and accumulation of aerobic points. Students must score at least 70% on rubric used for log checklist. Students will complete a fitness report evaluating progress in fitness and lifestyle changes. Students must score at least 70% on rubric used for fitness checklist.</td>
</tr>
<tr>
<td>2. Students will master competencies that will help them to develop proper lifelong habits to maintain a physical fitness program.</td>
<td>Students will maintain fitness logs including skills objectives, fitness assessments and accumulation of aerobic points. Students must score at least 70% on rubric used for log checklist. Students will analyze a chapter in the text, including preparing a journal and a typed summary of wellness goals from the chapter. Students must score at least 70% on rubric used for chapter checklist. Students will have 3 written exams and must score at least 70% on them.</td>
</tr>
<tr>
<td>3. Students will learn to use Cooper's aerobic point system.</td>
<td>Students must accumulate a set minimum number of aerobic points for at least 6 weeks. Students must score at least 70% on rubric used for aerobic points.</td>
</tr>
</tbody>
</table>
4. Students will develop a wellness/lifestyle project to promote the reduction of risk factors for disease. Students will complete a fitness report evaluating progress in fitness and lifestyle changes. Students must score at least 70% on rubric used for fitness checklist.

How does this course align with the student learning outcomes articulated for the major, program, or general education? What program-level outcome or outcomes does it support? Is the content or skill introduced, reinforced, or demonstrated in this course?

This activity course is not aligned with any general education or major program requirements. Through participation in this course, students will gain proficiency in the use of the techniques and tools of the discipline taught. The skills of the course are introduced, then reinforced and demonstrated continually throughout the semester.

VII. IMPACT ON EXISTING PROGRAMS and COURSES: Please briefly document the impact of this new/changed/deleted course on other programs and courses; if deleting a course—list all programs that include the course; if adding/changing a course—explain any overlap with existing courses in the same or different departments.

None

VIII. COSTS ASSOCIATED WITH THE ACTION REQUESTED: List all of the new costs or cost savings, (including new faculty/staff requests, library or equipment, etc.) associated with the action requested.

None

IX. APPROVAL AND SIGNATURES

1. Signature of Department Chair or Program Director:

[Signature]

Date: 10/31/11

2. Signature of Academic Dean:
Following Senate approval, the Faculty Senate Secretary will forward the entire packet to the Registrar.