September 16, 2013

To whom it may concern:

Attached are course forms for proposed pre-requisite changes for COMM 301 and COMM 410. Please let me know if you have any questions.

Sincerely,

[Signature]

Douglas A. Ferguson, Ph.D.
Department Curriculum Committee Chair
FACULTY CURRICULUM COMMITTEE
COURSE FORM

Instructions:
- Please fill out one of these forms for each course you are adding, changing, deactivating, or reactivating.
- Fill out the parts of the form specified in part B. You must do this before your request can move forward!
- Remember that your changes will not be implemented until the next catalog year at the earliest.
- If you have questions, start by checking the instructions on the website. Please feel free to contact the committee chairs with any remaining questions you might have.

A. CONTACT/COURSE INFORMATION.

Name: Beth Goodier Phone: 953-7420 Email: goodierb@cofc.edu

Department or Program: COMM School: HSS

Subject Acronym and Course Number: COMM 301

Catalog Year in which changes will take effect: FALL 2014

B. TYPE OF REQUEST. Please check all that apply, then fill out the specified parts of the form.

☐ Add a New Course (complete parts C, D, F, G, H, I, J, K)
☒ Change Part of an Existing Course (complete parts C, D, E, F, G, I, J, K)
  ☐ Course Number
  ☐ Course Name
  ☐ Course Description
  ☐ Credit/Contact Hours
  ☒ Restrictions (prerequisites, co-requisites, junior/senior standing, etc.)
  ☐ Deactivate an Existing Course (complete parts C, D, E, G, I, J, K)
  ☐ Reactivate a Previously-Deactivated Course (complete parts C, D, E, G, I, J, K)

C. RATIONALE AND EXPLANATION. Please describe your request and explain why you are making it.

Junior/senior standing is an unnecessary roadblock for COMM 301. As a result, the existing prerequisite should be eliminated.

D. IMPACT ON EXISTING PROGRAMS AND COURSES. Please briefly describe the impact of your request on your own programs and courses as well other programs and courses. If another program requires the course, you must submit their written acknowledgement with this proposal. Also, the affected program must describe any change in the number of credit hours they require. Include a list of similar courses in other departments and explain any overlap.

No impact at all.
E. EXISTING COURSE INFORMATION. If you are proposing a new course, just leave this blank. Otherwise, please fill out all fields.

Department: 
School: 
Subject Acronym: 
Course Number: 

Credit hours: 3  X  lecture  _  lab  _  seminar  _  independent study 
Contact hours: 3  X  lecture  _  lab  _  seminar  _  independent study

Course title: Communication Research Methods

Course description (maximum 50 words, exactly as it appears in the catalog):

Qualitative and quantitative methods employed in communication research, including experiments, surveys, textual analysis, and ethnography.

Restrictions (pre-requisites, co-requisites, majors only, etc.):

Prerequisites: COMM 104 or 280 (formerly COMM 110); COMM 214 or 215; MATH 104 or MATH 250; or department chair permission. A grade of C- or better must be earned for all prerequisite courses.

Cross-listing, if any:

Is this course repeatable?  ☐ yes  X  no  If yes, how many total credit hours may the student earn? ____

F. NEW COURSE INFORMATION. If you are deactivating a course, leave this blank. Otherwise, please fill out all fields. For changed courses, use **boldface** for the information that is changing.

Department: 
School: 
Subject Acronym: 
Course Number: 

Credit hours:  _  lecture  _  lab  _  seminar  _  independent study 
Contact hours:  _  lecture  _  lab  _  seminar  _  independent study

Course title:

Course description (maximum 50 words, exactly as it appears in the catalog):

Restrictions (pre-requisites, co-requisites, majors only, etc.):

If this is a newly-created course, is it intended to be the equivalent of an existing course and replace it?  ☐ yes  ☐ no
If so, which course? _______________
Note: You must deactivate that course by submitting an additional Course Form.

Cross-listing, if any (submit approval from relevant department):
Note: Cross-listed courses are equivalent.

Is this course repeatable?  ☐ yes  ☐ no  If yes, how many total credit hours may the student earn? ____

Is there an activity, lab, or other fee associated with this course?  ☐ yes  ☐ no  What is the fee? $_____ 
Note: The Senate cannot approve new fees; Business Affairs will submit any such request to the Board of Trustees. The course can still be created, but the fee will not be attached until the Board has approved it.
G. COSTS. List all of the new costs or cost savings (including new faculty/staff requests, library, equipment, etc.) associated with your request.

None

H. STUDENT LEARNING OUTCOMES AND ASSESSMENT.

<table>
<thead>
<tr>
<th>Student Learning Outcomes</th>
<th>Assessment Method and Performance Expected</th>
</tr>
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<tbody>
<tr>
<td>What will students know and be able to do when they complete the course?</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?

I. PROGRAM CHANGES. Will this course be added to the existing degree requirements or list of approved electives of a major, minor, or concentration? ☐ yes  ☒ no

If yes, please attach a Change Minor and/or Change Major/Program Form as appropriate.

J. CHECKLIST.

This form was last updated on 06/03/13 and replaces all others.
☒ I have completed all relevant parts of the form.

☒ I have attached a cover letter that describes my request and lists all the documents I am submitting.

☐ (For new courses only) I have attached a syllabus.

☐ (For courses used in any way by other departments, including cross-listing) I have attached an acknowledgement from the relevant department.

☐ (For courses intended to fulfill a Gen Ed requirement) I have submitted the proposal to the Gen Ed committee.

☒ I have submitted one Signature Form that lists all of the different forms I am submitting.
FACULTY CURRICULUM COMMITTEE
COURSE FORM

Instructions:
- Please fill out one of these forms for any changes, deactivating, or reactivating.
- Fill out the parts of the form specific to your changes.
- Remember that your changes will not take effect until next year.
- If you have questions, start by checking with other chairs with any remaining questions.

A. CONTACT/COURSE INFORMATION

Name: Beth Goodier
Phone:
Department or Program: COMM Sc
Subject Acronym and Course Number:
Catalog Year in which changes will take effect:

B. TYPE OF REQUEST. Please check all that apply, then circle:

☐ Add a New Course (complete parts C, D, F, G, H, I, J, K)
☒ Change Part of an Existing Course (complete parts C, D, E, F, G, H, I, J, K)
☐ Course Number
☐ Course Name
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☐ Credit/Contact Hours
☒ Restrictions (prerequisites, co-requisites, junior/senior standing, etc.)
☐ Deactivate an Existing Course (complete parts C, D, E, G, H, I, J, K)
☐ Reactivate a Previously-Deactivated Course (complete parts C, D, E, G, H, I, J, K)

C. RATIONALE AND EXPLANATION. Please describe your request and explain why you are making it.

While COMM 301 is a necessary roadblock for COMM 480 because both entail research methods, COMM 410 does not require research methods. As a result, the existing prerequisite should be eliminated.

D. IMPACT ON EXISTING PROGRAMS AND COURSES. Please briefly describe the impact of your request on your own programs and courses as well other programs and courses. If another program requires the course, you must submit their written acknowledgement with this proposal. Also, the affected program must describe any change in the number of credit hours they require. Include a list of similar courses in other departments and explain any overlap.

No impact at all.

This form was last updated on 06/03/13 and replaces all others.
E. EXISTING COURSE INFORMATION. If you are proposing a new course, just leave this blank. Otherwise, please fill out all fields.

Department: \[\text{School:} \quad \text{Subject Acronym:} \quad \text{Course Number:} \]

Credit hours: 4 \[\_\text{lecture} \quad _\text{lab} \quad _\text{seminar} \quad _\text{independent study} \]
Contact hours: 4 \[\_\text{lecture} \quad _\text{lab} \quad _\text{seminar} \quad _\text{independent study} \]

Course title: Analysis of Communication Practice

Course description (maximum 50 words, exactly as it appears in the catalog):

Advanced writing course emphasizing the interrogation of historical and/or contemporary communication practices. Topics vary depending on the course section and instructor. This course meets for 3 hours; the 4th hour will be scheduled independently by the professor. Students can take this course up to three times and earn credit, as long as the course content varies, and with permission of the department chair.

Restrictions (pre-requisites, co-requisites, majors only, etc.):

Prerequisites: COMM 280 (or COMM 110)/COMM 281 (or COMM 111); COMM 214; COMM 215; COMM 301; COMM 310; or department chair permission. A grade of C- or better must be earned for all prerequisite courses.

Cross-listing, if any:

Is this course repeatable? \[\square \text{yes} \quad x \text{no} \] If yes, how many total credit hours may the student earn? ___

F. NEW COURSE INFORMATION. If you are deactivating a course, leave this blank. Otherwise, please fill out all fields. For changed courses, use **boldface** for the information that is changing.

Department: \[\text{School:} \quad \text{Subject Acronym:} \quad \text{Course Number:} \]

Credit hours: \[\quad \_\text{lecture} \quad _\text{lab} \quad _\text{seminar} \quad _\text{independent study} \]
Contact hours: \[\quad \_\text{lecture} \quad _\text{lab} \quad _\text{seminar} \quad _\text{independent study} \]

Course title:

Course description (maximum 50 words, exactly as it appears in the catalog):

Restrictions (pre-requisites, co-requisites, majors only, etc.):

If this is a newly-created course, is it intended to be the equivalent of an existing course and replace it? \[\square \text{yes} \quad \square \text{no} \] If so, which course? _______________

Note: You must **deactivate** that course by submitting an additional Course Form.

Cross-listing, if any (submit approval from relevant department):

Note: Cross-listed courses are equivalent.

Is this course repeatable? \[\square \text{yes} \quad \square \text{no} \] If yes, how many total credit hours may the student earn? ___

Is there an activity, lab, or other fee associated with this course? \[\square \text{yes} \quad \square \text{no} \] What is the fee? $___

This form was last updated on 06/03/13 and replaces all others.
G. COSTS. List all of the new costs or cost savings (including new faculty/staff requests, library, equipment, etc.) associated with your request.

None

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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?

I. PROGRAM CHANGES. Will this course be added to the existing degree requirements or list of approved electives of a major, minor, or concentration? □ yes  X no

If yes, please attach a Change Minor and/or Change Major/Program Form as appropriate.
J. CHECKLIST.

☑ I have completed all relevant parts of the form.

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☑ I have submitted one Signature Form that lists all of the different forms I am submitting.
FACULTY CURRICULUM COMMITTEE
SIGNATURE PAGE

- In section A, list ALL of the forms covered by this signature page. *If you submit a form that is not listed in A, your proposal will be held back until we receive a new, updated signature page.*
- You must obtain the signature of your department chair and dean before submitting your proposal.

A. FORMS COVERED BY THIS SIGNATURE PAGE. List each form you are submitting—for instance, PSYC 383, Course Form; PSYC, Change of Major Form; PSYC, Change of Minor Form.

COMM 301  Course Form
COMM 410  Course Form

B. APPROVAL AND SIGNATURES.

1. Signature of Department Chair or Program Director:

   [Signature]

   Date: 9/16/13

2. Signature of Academic Dean:

   [Signature]

   Date: 9/16/13

3. Signature of Provost:

   [Signature]

   Date: __________

4. Signature of Business Affairs (only for course fees):

   [Signature]

   Date: __________

   □ fee approved on __________
   □ BOT approval pending

5. Signature of Curriculum Committee Chair:

   [Signature]

   Date: __________

6. Signature of Budget Committee Chair (only for new programs):

   [Signature]

   Date: __________

7. Signature of Academic Planning Committee Chair (only for new programs):

   [Signature]

   Date: __________

8. Signature of Faculty Senate Secretary:

   [Signature]

   Date: __________

Date Approved by Faculty Senate: __________
Your interpretation of dropping jr/sr prereq for COMM 301 and dropping 301 prereq for COMM 410 is correct.

Doug Ferguson

On Oct 3, 2013, at 10:34 AM, "Boyd, Catherine C" <BoydC@cofc.edu> wrote:

All,

Please see the attached list of questions concerning curriculum proposals submitted to the FCC for your area. The Registrar’s office has reviewed the proposals and we need a few clarifications which are indicated by the courses. Can you get back with us on these as soon as possible?

Thanks!

Cathy

Catherine C. Boyd
Registrar
College of Charleston
Charleston, SC 29424-0001
Email: boydc@cofc.edu
Phone: 843.953.4901

<FCC October Proposal Notes.docx>
Here is the email acknowledgement your committee sought for the change with COMM 301. I hope this will allay any concerns.

Thanks.

Doug

From: <Kopfman>, Jenifer Kopfman <kopfmanj@cofc.edu>
Date: Wednesday, October 16, 2013 1:12 PM
To: "Goodier, Bethany C" <goodierb@cofc.edu>
Subject: COMM 301 prerequisite change

Dear Dr. Goodier:
I understand that the Communication department proposes to change the prerequisites for COMM 301, a course that may be used to fill a requirement for public health majors. Removing the junior/senior standing prerequisite for COMM 301 will have no impact on the PBHL students taking that course. The Public Health program fully supports making this change.
Please let me know if any additional information is needed as you move this proposal through the committee process.
Jen

Dr. Jenifer Kopfman
Associate Professor of Communication
Director of B.A. in Public Health
Department of Communication
College of Charleston
Office location: 9 College Way #302
Mail to: 66 George Street, Charleston, SC 29424-0001
office: 843.953.5775
fax: 843.953.7037