Contact Name: Craig Plante  Email: plantec@cofc.edu  Phone: 953-9187

Department Name: Biology  Graduate Program name: Marine Biology

Course Prefix, Number, and Title: Biol. 510 Field Methods in Marine Ecology

I. CATEGORY OF REVIEW (Check all that apply)

<table>
<thead>
<tr>
<th>NEW COURSE</th>
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<td>□ Change Number (IV, VII, VIII, IX)</td>
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☐ Approve for Cross-listing (attach Graduate Permission to Cross-list Form)

Date (Semester/Year) the course will first be offered, course changes or deletion will go into effect:

NEW COURSE:

*ATTACH THE SYLLABUS FOR A NEW GRADUATE COURSE to include:

- Course description and objectives
- Method of teaching (e.g., lecture, seminar, on-line, hybrid)
- Required and optional texts and materials
- Graduate School Grading Scale
- Assignments, student learning outcomes and assessment components
- Policies to include attendance, Honor Code, American Disabilities Act statement
- Tentative course schedule with specific topics
List prerequisites and / or other restrictions below

Will this course be added to the Degree Requirements?

a) ☐ Yes  ☐ No

b) If yes, explain

II. NUMBER OF CREDITS and CONTACT HOURS per week

A. Contact Hours

B. Credit Hours

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. If changing course description, please include both old and new course descriptions.
IV. RATIONALE / JUSTIFICATION: If course change – please indicate the course change details. 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 and the relationship to the strategic plan.

Course is being deleted because it has not been offered in over two decades. The course subject matter is largely covered in the laboratory portion of another course (Biol. 601, Ecology of Marine Organisms).

V. STUDENT LEARNING OUTCOMES and ASSESSMENT

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<th>Student Learning Outcomes</th>
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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 and expected changes of this new/changed/deleted course on other departments, programs and courses; if deleting a course—list all departments and programs that include the course; if adding/changing a course—explain any overlap with existing courses in the same or different departments; if adding or deleting a course that will be part of a joint program identify the partner institution.

No impact is anticipated because the course has not been offered in decades. Students potentially taking such a course would be Masters in Environmental Studies (MES) students, in addition to GPMB students. The needs for knowledge about field methodologies in marine ecology have been and will continue to be met by the Ecology of Marine Organisms (Biol. 601) course and individualized training by thesis mentors.

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. New courses requiring additional resources will need special justification.

None
IX. APPROVAL AND SIGNATURES

Signature of Program Director: 

Date: 11-10-15

Signature of Department Chair: 

Date: 11/13/15

Signature of Additional Chair*: 

Date: 11/18/15

Signature of Schools' Dean: 

_________________________________________________________ Date: __________

Signature of Additional Schools' Dean*: 

_________________________________________________________ Date: __________

Signature of the Provost: 

_________________________________________________________ Date: 1/20/16

Signature of Budget Director/Business Affairs Office: 

_________________________________________________________ Date: __________

*For interdisciplinary courses

Return form to the Graduate School Office for Further Processing

Signature of Chair of the Faculty Committee on Graduate Education, Continuing Education & Special Programs: 

_________________________________________________________ Date: 1/22/16

Signature of Chair of the Graduate Council: 

_________________________________________________________ Date: 2/15/16

Signature of Faculty Senate Secretary: 

_________________________________________________________ Date: __________

Date Approved by Faculty Senate: 

_________________________________________________________
Contact Name: Craig Plante  Email: plantec@cofc.edu  Phone: 953-9187

Department Name: Biology  Graduate Program name: Marine Biology

Course Prefix, Number, and Title:  Biol. 631 Biology of Crustacea

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List prerequisites and / or other restrictions below
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a) □ Yes  □ No

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Course is being deleted because it has not been offered in over two decades. The course subject matter is too specific to attract sufficient student enrollment. Students needing more knowledge of subject matter can obtain much of the desired information in another course (Biol. 630, Marine Invertebrate Zoology).

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Date: 11/13/15

Signature of Additional Chair*:

Date: 11/14/15

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Date: ________________

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Date: ________________

Signature of the Provost:

Date: 1/20/16

Signature of Budget Director/Business Affairs Office:

Date: ________________

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Date: 1/27/16

Signature of Chair of the Graduate Council:

Date: 2/15/16

Signature of Faculty Senate Secretary:

Date: ________________

Date Approved by Faculty Senate: ________________

September 2011