Submit originals and one copy and electronic copy to Governance/Faculty Senate Office. See http://www.uaf.edu/uafgov/faculty/cd for a complete description of the rules governing curriculum & course changes.

CHANGE COURSE (MAJOR) and DROP COURSE PROPOSAL

SUBMITTED BY:

Department: Biology & Wildlife
Prepared by: Dawn Dearinger
Email: dmdearinger@alaska.edu
College/School: CNSM
Phone: 474-6294
Faculty Contact: Christa Mulder

1. COURSE IDENTIFICATION:
   Dept. BIOL Course # F418W No. of Credits 4
   COURSE TITLE: Developmental Biology

2. ACTION DESIRED:
   Change Course [ ] If Change, indicate below [ ] Drop Course [x]
   [ ] what change.

   NUMBER [ ] TITLE [ ] DESCRIPTION [ ]
   PREQUISITES [ ] FREQUENCY OF OFFERING [ ]
   CREDITS (including credit distribution) [ ]
   CROSS-LISTED X Dept. CHE M (Requires approval of both departments and deans involved. Add lines at end of form for such signatures.)
   STACKED (400/600) [ ] Dept. [ ] Course # [ ]
   Include syllabi. [ ]
   OTHER (please specify) [ ]

3. COURSE FORMAT
   NOTE: Course hours may not be compressed into fewer than three days per credit. Any course compressed into fewer than six weeks must be approved by the college or school’s curriculum council. Furthermore, any core course compressed to less than six weeks must be approved by the core review committee.
   COURSE FORMAT: [check all that apply] [1] [2] [3] [4] [5] [x] 6 weeks to full semester
   OTHER FORMAT (specify all that apply) [ ]
   Mode of delivery (specify lecture, field trips, labs, etc) [ ]
   RECEIVED NOV - 1 2010
   Dean’s Office
   College of Natural Science & Mathematics

4. COURSE CLASSIFICATIONS: (undergraduate courses only. Use appendices A & B on inside front and back covers. Page 10 & 17 of the manual. If justification is needed, attach on separate sheet.)
   H = Humanities [ ]
   S = Social Sciences [ ]
   Will this course be used to fulfill a requirement [ ] YES [x] NO [ ]
   for the baccalaureate core?
   IF YES, check which core requirements it could be used to fulfill:
   O = Oral Intensive, [ ] W = Writing Intensive, [x] Natural Science, [ ]
   Format 6 also submitted [ ] Format 7 submitted [ ] Format 8 submitted [ ]

5. COURSE REPEATABILITY:
   Is this course repeatable for credit? [ ] YES [x] NO [ ]
   Justification: Indicate why the course can be repeated
   (for example, the course follows a different theme each time). [ ]
   How many times may the course be repeated for credit? [ ] TIMES
   If the course can be repeated with variable credit, what is the maximum number of credit hours that may be earned for this course? [ ] CREDITS
6. CURRENT CATALOG DESCRIPTION AS IT APPEARS IN THE CATALOG: including dept., number, title and credits

7. COMPLETE CATALOG DESCRIPTION AS IT WILL APPEAR WITH THESE CHANGES: (Underline new wording strike-through old wording and use complete catalog format including dept., number, title, credits and cross-listed and stacked.) PLEASE SUBMIT NEW COURSE SYLLABUS. For stacked courses the syllabus must clearly indicate differences in required work and evaluation for students at different levels.

8. IS THIS COURSE CURRENTLY CROSS-LISTED?
   YES/NO  Yes
   IF YES, DEPT  CHEM
   NUMBER  F418W
   (Requires written notification of each department and dean involved. Attach a copy of written notification.)

9. GRADING SYSTEM: Specify only one
   LETTER:  
   PASS/FAIL:  

10. ESTIMATED IMPACT
    WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC.
    This will not have any impact on budget, facilities or faculty.

11. LIBRARY COLLECTIONS
    Have you contacted the library collection development officer (kljensen@alaska.edu, 474-6695) with regard to the adequacy of library/media collections, equipment, and services available for the proposed course? If so, give date of contact and resolution. If not, explain why not.
    No  Yes

12. IMPACTS ON PROGRAMS/DEPTS:
    What programs/departments will be affected by this proposed action?
    Include information on the Programs/Departments contacted (e.g., email, memo)

13. POSITIVE AND NEGATIVE IMPACTS
    Please specify positive and negative impacts on other courses, programs and departments resulting from the proposed action.

JUSTIFICATION FOR ACTION REQUESTED
The purpose of the department and campus-wide curriculum committees is to scrutinize course change and new course applications to make sure that the quality of UAF education is not lowered as a result of the proposed change. Please address this in your response. This section needs to be self-explanatory. If you ask for a change in # of credits, explain why; are you increasing the amount of material covered in the class? If you drop a prerequisite, is it because the material is covered elsewhere? If course is changing to stacked (400/600), explain higher level of effort and performance required on part of students earning graduate credit. Use as much space as needed to fully justify the proposed change and explain what has been done to ensure that the quality of the course is not compromised as a result.
This course has not been taught in > 5 years and the faculty member who developed the course left many years ago. We do anticipate reintroducing Developmental Biology back into the curriculum in the future, following some workload shifts of current faculty, but as a completely redesigned course and likely without the lab component (which we currently do not have the facilities to teach properly). We would prefer to remove it from the catalogue and have it re-established following the redesign than to have it linger on the books in its current outdated (and unavailable) state.

APPROVALS:

Signature, Chair, Program/Department of: Christa P.H. Mulder  
Date Oct 24, 2010

Signature, Chair, College/School Curriculum Council for: CNSM  
Date 26 Oct 2010

Signature, Dean, College/School of: CNSM  
Date 2 Nov 2010

Signature of Provost (if applicable)
Offerings above the level of approved programs must be approved in advance by the Provost.

ALL SIGNATURES MUST BE OBTAINED PRIOR TO SUBMISSION TO THE GOVERNANCE OFFICE.

Signature, Chair, UAF Faculty Senate Curriculum Review Committee  
Date

ADDITIONAL SIGNATURES: (As needed for cross-listing and/or stacking)

Signature, Chair, Program/Department of: Chemistry + Biochemistry  
Date 29 Oct 2010

Signature, Chair, College/School Curriculum Council for:  
Date

Signature, Dean, College/School of:  
Date