**FORMAT 2A**

**Submit original with signatures to Registrar's Office**

**Send electronic copy to the Governance Office**

***CHANGE COURSE (MINOR)***

**MINOR COURSE CHANGES INCLUDE ONLY THE FOLLOWING:**

1. Frequency of offering.

2. Minor editorial changes in title and/or course description.

3. Jointly approved proposals for cross-listing current courses. (Requires approval of both departments and deans involved. Add lines at end of form for additional signatures.)

 (Stacking of 400/600 level courses is NOT considered a minor change.)

4. Change in course number that does not involve a change in **lower/upper** division status.

5. Internal departmental changes in **NON-CORE** course prerequisites. Changes MUST NOT affect courses (or degree programs) offered by other departments.

**If changes cannot be considered "Minor" (as defined above), use the FORMAT 2 - CHANGE COURSE (MAJOR) and DROP COURSE form.**

**Remember to submit a Program Change form (Format 5 or 5A) if appropriate.**

Catalog deadlines apply. Send Minor Change requests directly to the Registrar's Office after Dean’s approval. (Please send informational e-copy to the UAF Governance Office.)



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| ***SUBMITTED BY:***

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| --- | --- | --- | --- |
| **Department** |  **Indigenous Community and Tribal Programs: TM** | **College/School** | **CRCD** |
| **Prepared by** |  **Kevin M Illingworth, JD** | **Phone** | **X5710**  |
| **Email Contact** | **kevin.i@alaska.edu** | **Faculty Contact** | **Kevin M. Illingworth, JD**  |

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*See http://www.uaf.edu/uafgov/faculty-senate/curriculum/course-degree-procedures-/ for a complete description of the rules governing curriculum & course changes.*

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| ***1. COURSE IDENTIFICATION:***

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| --- | --- | --- | --- | --- | --- |
| Dept |  **TM** | Course # | **205** | No. of Credits | **3** |

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| ***COURSE TITLE*** | **Advanced Tribal Finance Applications** |

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| ***2****.* ***ACTION DESIRED: Indicate what is changing with an “X” or checkmark:***

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| --- | --- | --- | --- | --- | --- |
| ***NUMBER***  |  | **TITLE** | X | **DESCRIPTION** |  |
| ***PREREQUISITES*** |  | ***FREQUENCY OF OFFERING*** |  |
| ***CROSS-LISTED*** |  | Dept. |  | (Requires approval of both departments and deans involved. Add lines at end of form for such signatures.) |

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| ***3. CURRENT CATALOG DESCRIPTION AS IT APPEARS IN THE CATALOG: including dept., number, title and credits. (Use online Catalog to cut and paste.)***

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| **TM F205 Advanced Tribal Finance Applications**3 Credits Advanced tools and methods for the management and oversight of tribal government programs and organizations in rural Alaska. Student evaluation includes how well the student affects changes in tribal operations and tribal management. Prerequisites: TM F105 and must be familiar with computer and related word processing and spreadsheet programs. (3+0) |

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| ***4. MARK-UP OF COMPLETE CATALOG DESCRIPTION ILLUSTRATING CHANGES: (Underline new wording ~~strike through old wording~~ and use complete catalog format including dept., number, title, credits and cross-listed and stacked.)***

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| **TM F205 ~~Advanced~~ ~~Tribal Finance Applications~~** Managing Tribal Governments II3 Credits Advanced tools and methods for the management and oversight of tribal government programs and organizations ~~in rural Alaska~~. Student evaluation includes how well the student affects changes in tribal operations and tribal management. Prerequisites: TM F105 and must be familiar with computer and related word processing and spreadsheet programs. (3+0) |

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| ***5. IS THIS COURSE CURRENTLY CROSS-LISTED?***

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| **YES/NO** | **no** | **If Yes, DEPT** |  | **NUMBER** |  |

 (Requires written notification of each department and dean involved. Attach a copy of written notification.) |

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| ***6. ESTIMATED IMPACT***

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| *WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC.* |
| **None, simple change to course title** |

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| ***7. IMPACTS ON PROGRAMS/DEPTS:***

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| *What programs/departments will be affected by this proposed action?**Include information on the Programs/Departments contacted (e.g., email, memo)* |
| **TM** |

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| ***JUSTIFICATION FOR ACTION REQUESTED***The purpose of the department and campus-wide curriculum committees is to scrutinize course change 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 drop a prerequisite, is it because the material is covered elsewhere? 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.

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| **This title more accurately reflects course content and goals** |

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| ***APPROVALS: Add signature blocks as necessary (e.g., cross listing approvals)***

|  |  |  |
| --- | --- | --- |
|  | Date |  |
| Signature, Chair, Program/Department of: |  |

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

|  |  |  |
| --- | --- | --- |
|  | Date |  |
| Signature, Dean, College/School of: |  |

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| **ALL SIGNATURES MUST BE OBTAINED PRIOR TO SUBMISSION TO THE REGISTRAR'S OFFICE**

|  |  |  |
| --- | --- | --- |
|  | Date |  |
| Received Registrar's Office |

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