**FORMAT 2A**

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

**Send electronic copy to the Governance Office**

***CHANGE COURSE (MINOR)***

***REVISED 9/18/15***

**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** |  **ALASKA NATIVE STUDIES & RURAL DEVELOPMENT** | **College/School** | **CRCD** |
| **Prepared by** |  **Jenny Bell-Jones** | **Phone** | **907 474 6842**  |
| **Email Contact** |  **jbjones@alaska.edu** | **Faculty Contact** | **JENNIE CARROLL**  |

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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 |  **RD** | Course # | **475** | No. of Credits | **3** |

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| ***COURSE TITLE*** | **RURAL DEVELOPMENT SENIOR PROJECT** |

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

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| ***NUMBER***  |  | **TITLE** |  | **DESCRIPTION** | X |
| ***PREREQUISITES*** |  | ***FREQUENCY OF OFFERING*** | X |
| ***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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| **RD F475 W Rural Development Senior Project (a)3 Credits Under faculty supervision, the student will complete a major theoretical, research and/or applied project which relates the student's applied emphasis area. Prerequisites: ENGL F111X; ENGL F211X or ENGL F213X; senior standing; or permission of instructor. (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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| **RD F475 W Rural Development Senior Project (a)3 Credits** **Offered SpringUnder faculty supervision, the student will complete a major theoretical, research and/or applied project which relates to the student's applied emphasis area. Prerequisites: ENGL F111X; ENGL F211X or ENGL F213X; senior standing; or permission of instructor. (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.* |
| **This change will result in a better allocation of faculty time. Instead of having this course assigned to the workload every semester regardless of enrollment needs, the instructor of record will now only offer it once per AY and will be able to teach a different course during the other semester. It should have a small but positive effect on the Department budget.** |

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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)* |
| **There will be no measurable impact on other programs or departments.** |

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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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| **Prior to AY 15/16 DANSRD had always offered RD 475 every semester regardless of student needs. While this was convenient for the student who wanted to graduate in December it was an expensive and inefficient use of faculty time. It often resulted in only one or two students taking the course per semester; sometimes they really did need it to graduate in December but more often this had to do with their own preference.** **We now have a very competent Student Success Coordinator who is helping students to plan their schedules better and the need for a student to take RD 475 “on short notice” (because they had a poorly executed graduation plan) should soon be a thing of the past. Students planning to graduate in December will be advised to complete RD 475 the previous spring.** **If a circumstance does arise where not being able to take RD 475 during the fall semester would actually prevent a student from graduating we will arrange for them to do the course by independent study.****NOTE: in addition to revising frequency of offering we are adding the word “to” in the first sentence of the course description to correct some poor grammar.** |

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

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

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

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

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

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

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