REQUEST FOR A COURSE CHANGE
University of Central Oklahoma

Course Subject (Prefix), Number, and Title:

Existing:

Course Subject

Number

Visualization I

Course Title (maximum of 30 spaces)

Proposed:

Proposed Title:

Proposed change(s) to this course: Mark all that apply.

Credit Hour  Level  Title  Description  Prerequisite  Enrollment

Restriction

Other:

CIP Code

If changing, what is the new code?

For more information regarding CIP codes contact your department chair or visit:

http://www.uco.edu/academic-affairs/ir/program_inventory.asp.

Course description:

As it appears in the current catalog. (required)

This studio course is designed to work in tandem with Interior Design Studio I and will focus on presentation techniques such as tendering, model building, perspectives, color boards, as well as written and oral communication.

As it will appear in the next catalog or indicate no change. (Please use standard American English including full sentences.)

Course descriptions only. Do not include prerequisites or enrollment restrictions, these should be added under questions 9-15.

Proposed: No change

Design

Department submitting the proposal

Valerie Settles  vsettles@uco.edu  5219

Person to contact with questions  email address  Ext. number

Approved by:

Amy Johnson  (digital sig.)  09.15.20

Department Chairperson

Date

Academic Affairs Curriculum or Graduate Council

Date

Office of Academic Affairs

Date

Effective Term (assigned by AA)

Functional Review

(undergraduate proposals only)
1. Does this course have an undergraduate / graduate counterpart?  
   ___ Yes   X No

2. Is this proposal part of a larger submission package including a program change?  
   X Yes   ___ No

3. Does this course affect a teacher preparation program? (All courses required for any teacher preparation program must have approval from the Council on Teacher Education (CTE) before approval from AACC or Graduate Council.)  
   ___ Yes   ___ No  If yes, send copy of proposal to the Education Curriculum Committee Chair, Dr. Darla Fent
   CTE Approval (Stamp or initial)

4. Is this course currently listed in the University Core?  
   If you wish this course be listed in the University Core, submit University Core course proposal.  
   ___ Yes   X No

5. Is this course a prerequisite for any other course(s)?  
   X Yes   ___ No  If this change affects the prerequisite, complete course change proposal to delete or change prerequisite.

6. Is this course a requirement in any major or minor?  
   X Yes   ___ No  If this change impacts the requirement of any major or minor, complete program change proposal.

7. Does this course affect majors or minors outside the department?  
   If yes, provide name(s) of department chair(s) contacted, the dates, and the results of the discussion.  
   ___ Yes   X No

8. List all majors or minors which include this changed course as a requirement or elective.  
   (list major or minor by title not major code)
   Design - Interior Design

9. Prerequisite courses:  
   Will the prerequisite courses change?  
   X Yes   ___ No  If yes, fill out below, if no leave blank.
   NOTE: Adding a "new course" as a prerequisite to an existing course will likely cause enrollment problems.
   As listed at the end of the course description in the current catalog. (Required)
   Existing: DES 1023, 1033, 1043, 1053, 1121, and 1412
   Proposed: DES 1023, 1xx3 (Design Foundations II – Interior Design), 1043, 1xx3 (Design Foundations IV – Interior Design), 1121 and 1412
   Example 1: MATH 1213 and (MATH 2165 or MATH 2185) and CHEM 1213  
   Example 2: (ACCT 2113 and 2213) and (MGMT 3013 or 3613)  
   Example 3: 8 hours of biology including BIO 1404

10. Co-requisite(s): Prerequisite courses that may be taken in the same semester.  
    Will the co-requisite(s) change?  
    ___ Yes   X No  If yes, fill out below, if no leave blank.
    As listed at the end of the course description in the current catalog. (Required)
    Existing: 
    Proposed:

11. Concurrent enrollment: Courses that must be taken the same semester. Example: lab courses.  
    Will the concurrent enrollment change?  
    ___ Yes   X No  If yes, fill out below, if no leave blank.
    As listed at the end of the course description in the current catalog. (Required)
    Existing: 
    Proposed:
12. Does this course currently have enrollment restrictions?
   X Yes  ___ No 
   If adding or changing enrollment restrictions answer questions 13-15. If not changing or add enrollment restrictions leave questions 13-15 blank.

13. Specify which major(s) may or may not take this course.
   Will the major(s) restriction change?  ___ Yes  ___ No 
   If yes, fill out below, if no leave blank.
   Specifying a major, excludes all other majors from enrolling.
   Existing (as appears in current catalog)
   Check one: May  ___ May not  ___
   Major Code: __________________________
   Proposed (if changing)
   Check one: May  ___ May not  ___
   Major Code: __________________________

14. Which of the following student classification(s) may enroll in this course?
   Will the classification restriction change?  ___ Yes  ___ No 
   If yes, fill out below, if no leave blank.
   Existing (as appears in current catalog)
   Check all that apply:
   Graduate (2) 19+ hours ___
   Graduate (1) 0-18 hours ___
   Post Baccalaureate ___
   Senior ___
   Junior ___
   Sophomore ___
   Freshman ___
   Proposed (if changing)
   Check all that apply:
   Graduate (2) 19+ hours ___
   Graduate (1) 0-18 hours ___
   Baccalaureate ___
   Senior ___
   Junior ___
   Sophomore ___
   Freshman ___

15. Specify other restrictions for this course, if any.
   Will other restrictions change?  ___ Yes  ___ No 
   If yes, fill out below, if no leave blank.
   Existing (as appears in current catalog)
   Admission to Graduate Programs ___
   Admission to Nursing Program ___
   Admission to Teacher Education ___
   Other: ___
   Proposed (if changing)
   Admission to Graduate Programs ___
   Admission to Nursing Program ___
   Admission to Teacher Education ___
   Other: ___

16. Course objectives for this course: (Please refer to instructional objectives documents at: https://spaces.ucos.edu/display/aaccproposals/UCO%3AAACC-main-page#UCOAACC-mainpage-faq-helpful-hints.)
   If previously approved objectives will be used without any changes, check here X
   Existing: __________________________
   As they appear in the course syllabus.
   Proposed: __________________________
   As they will appear in the updated syllabus.

17. Please provide a concise, yet comprehensive, statement that explains the specific reasons for requesting the change(s). Include any documentation or assessment information available supporting this specific request.
   New course forms have been submitted to establish discipline-specific Design Foundations II and IV courses for interior design majors; this course change form will update the pre-requisite list to reflect that change.
18. Clearly explain how the characteristics of this course meet or exceed those outlined in Course Level Characteristics. Complete this question only if requesting a course level change. (Copy and paste table from "Course Level Characteristics" document for the appropriate course level of proposed course. Document may be found on: https://spaces.uco.edu/display/aaccproposals/UCO+AACC-main+page#UCOAACC-mainpage-faq-helpful-hints. N/A _______