

 FLORIDA ATLANTIC UNIVERSITY	COURSE CHANGE REQUEST Graduate Programs	UGPC Approval _____ UFS Approval _____ SCNS Submittal _____ Confirmed _____ Banner _____ Catalog _____
	Department <small>Teaching and Learning</small> College <small>Of Education</small>	
Current Course Prefix and Number EME 6415		Current Course Title Courseware Design
<i>Syllabus must be attached for ANY changes to current course details. See Guidelines. Please consult and list departments that may be affected by the changes; attach documentation.</i>		
Change title to: Change prefix From: To: Change course number From: To: Change credits* From: To: Change grading From: To: Academic Service Learning (ASL) ** Add <input type="checkbox"/> Remove <input type="checkbox"/>		Change description to: Change prerequisites/minimum grades to: Remove EME 6601 as a prerequisite. Change corequisites to: Change registration controls to:
* Review Provost Memorandum ** Academic Service Learning statement must be indicated in syllabus and approval attached to this form.		Please list existing and new pre/corequisites, specify AND or OR and include minimum passing grade.
Effective Term/Year for Changes: Fall 2020		Terminate course? Effective Term/Year for Termination:
Faculty Contact/Email/Phone Victoria Brown/vbrown22@fau.edu/954-296-1007		
Approved by Department Chair <u>Paul H. Peluso</u> College Curriculum Chair <u>Paul H. Peluso</u> College Dean <u>[Signature]</u> UGPC Chair _____ UGC Chair _____ Graduate College Dean _____ UFS President _____ Provost _____		Date 9/22/20 9/23/20 9/28/2020 _____ _____ _____ _____

Email this form and syllabus to UGPC@fau.edu 10 days before the UGPC meeting.