	COURSE CHANGE REQUEST **Undergraduate Programs**	UUPC Approval _____ UFS Approval _____ SCNS Submittal _____ Confirmed _____ Banner Posted _____ Catalog _____
FLORIDA ATLANTIC UNIVERSITY	**Department** **College**	

Current Course **Prefix and Number**	*Current* Course Title

*Syllabus must be attached for **ANY** changes to current course details. See Checklist. Please consult and list departments that may be affected by the changes; attach documentation.*

Change title to:	**Change description to:**
Change prefix	
From: **To:**	
Change course number	**Change prerequisites/minimum grades to:**
From: **To:**	
Change credits*	
From: **To:**	
Change grading	**Change corequisites to:**
From: **To:**	
Change WAC/Gordon Rule status**	
Add **Remove**	**Change registration controls to:**
Change General Education Requirements** **Add** **Remove**	
*Review Provost Memorandum **WAC/Gordon Rule criteria must be indicated in syllabus and approval attached to this form. See WAC Guidelines. ***General Education criteria must be indicated in syllabus and approval attached to this form. See GE Guidelines.	Please list existing and new pre/corequisites, specify AND or OR and include minimum passing grade (default is D-).

Effective Term/Year for Changes:	**Terminate course? Effective Term/Year for Termination:**

Faculty Contact/Email/Phone

Approved by	*Date*
Department Chair _____	2/27/2020
College Curriculum Chair _____	*3-27-20*
College Dean *Fred Bloetscher (via email confirmation)*	*3-27-20*
UUPC Chair *Jerry Haky (via email confirmation)*	*3-30-20*
Undergraduate Studies Dean *Edward Pratt (via email confirmation)*	*3-31-20*
UFS President _____	_____
Provost _____	_____

Email this form and syllabus to mjenning@fau.edu seven business days before the UUPC meeting.