FLORIDA ATLANTIC

COURSE CHANGE REQUEST Undergraduate Programs

Department

| UUPC Approval |
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| UFS Approval |
| SCNS Submittal |
| Confirmed |
| Banner Posted |
| Catalog |

| ATLANTIC | | | Banner Posted | |
|---|--|--|---|--|
| UNIVERSITY | NIVERSITY College | | Catalog | |
| Current Course | | Current Cour | rse Title | |
| Prefix and Number | | | | |
| Syllabus must be attached for ANY changes to current course details. See <u>Checklist</u> . Please consult and list departments | | | | |
| | d by the changes; attach doci | | | |
| Change title to: | | C | hange description to: | |
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| Change prefix | | | | |
| From: | To: | | | |
| Change course n | ıumber | C | Or an arrange arrists a facinimum and da to. | |
| From: | To: | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | hange prerequisites/minimum grades to: | |
| Change credits* | | | | |
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| Change grading | | С | Change corequisites to: | |
| From: | To: | | | |
| Change WAC/Go | ordon Rule status** | | | |
| Add Remove | | | | |
| | | | change registration controls to: | |
| Change General | Education Requirement | | change registration controls to: | |
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Email this form and syllabus to mjenning@fau.edu seven business days before the UUPC meeting.