

Curriculum Change Form

(Present only one proposed curriculum change per form)
(Complete only the section(s) applicable.)

Part I

<input type="checkbox"/> (Check one) New Course (Parts II, IV)	Department Name	Curriculum and Instruction	
<input checked="" type="checkbox"/> Course Revision (Parts II, IV)	College	College of Education	
<input type="checkbox"/> Hybrid Course ("S," "W")	*Course Prefix & Number	EDF 310	
<input type="checkbox"/> New Minor (Part III)	*Course Title (full title±)	Transition to Education	
<input type="checkbox"/> New Certificate (Departmental only)	*Program Title		
<input type="checkbox"/> Program Suspension (Part III)			
<input type="checkbox"/> Program Revision (Part III)	If Certificate, indicate Long-Term (University) or Short-Term (Departmental)		
	* Provide only the information relevant to the proposal.	± If Title is longer than 30 characters see Part IV to provide abbreviation	

Proposal Approved by:	<u>Date</u>		<u>Date</u>
Departmental Committee	9/3/15	Council on Academic Affairs	1/21/16
College Curriculum Committee	11/17/15	Faculty Senate**	NA
General Education Committee*	NA	Board of Regents**	NA
Teacher Education Committee*	12/01/15	EFFECTIVE ACADEMIC TERM***	FALL 2016
Graduate Council*	NA		

*If Applicable (Type NA if not applicable.)
 **Approval needed for program revisions or suspensions.
 ***To be added by the Registrar's Office after all approval is received.

Completion of A, B, and C is required: (Please be specific, but concise.)

<p>A. 1. Specific action requested: (Example: Increase the number of credit hours for ABC 100 from 1 to 2.)</p> <ul style="list-style-type: none"> • Update course description to identify specific course equivalencies which would require a transfer candidate to enroll in EDF 310 during their first semester of enrollment at EKU. <p>A. 2. Proposed Effective Academic Term: Fall 2016</p> <p>A. 3. Effective date of suspended programs for currently enrolled students: (if applicable)</p>	
<p>B. The justification for this action:</p> <p>This action is taken to clarify the process for education candidates who transfer specific courses to EKU and the need for them to enroll in EDF 310 during their first semester of enrollment at EKU. This action will also assist advisors as they work with transfer candidates.</p>	
<p>C. The projected cost (or savings) of this proposal is as follows:</p> <p>Personnel Impact: NONE</p> <p>Operating Expenses Impact: NONE</p> <p>Equipment/Physical Facility Needs: NONE</p> <p>Library Resources: NONE</p>	

Part II. Recording Data for New, Revised, or Dropped Course(For a **new required course**, complete a separate request for the appropriate program revisions.)

1. For a new course, provide the catalog text.
2. For a revised course, provide the current catalog text with the proposed text using ~~strike through~~ for deletions and underlines for additions.
3. For a dropped course, provide the current catalog text.

New or Revised* Catalog Text

(*Use ~~strike through~~ for deletions and underlines for additions. Also include Crs. Prefix, No., and description, limited to 35 words.)

EDF 310 Transition to Education. (1-3) I, II. Prerequisite: Completion of Background check prior to the first day of the semester. ~~per CARES~~ Candidates will follow the College of Education Licensure and Certification approved procedure. ~~, must be ordered and paid for by the first day of class.~~ Co-requisite: CED 150. ~~Candidate transition either as a transfer or within the program when additional clinical hours are needed. Required of all transfer candidates.~~ EDF 310 is required of candidates who have an equivalent transfer course(s) for [EDF 203, CDF 203] or [EDF 219, CDF 235].

Part III. Recording Data for Revised or Suspended Program

1. For a revised program, provide the current program requirements using ~~strike through~~ for deletions and underlines for additions.
2. For a suspended program, provide the current program requirements as shown in catalog. List any concentrations and/or minors affected by the program's suspension.

Revised* Program Text

(*Use ~~strike through~~ for deletions and underlines for additions.)

Part IV. Recording Data for New or Revised Course (Record only new or changed course information.)

Course prefix (3 letters) EDF	Course Number (3 Digits) 310	Effective Academic Term (Example: Fall 2012) Fall 2016	College/Division: AS _____ HS _____ BT _____ JS _____ ED X _____ UP _____	Dept. (4 letters)* CURI
Credit Hrs.	Weekly Contact Hrs. Lecture _____ Laboratory _____ Other _____		Repeatable Maximum No. of Hrs. _____	
Schedule Type* (List all applicable)	Work Load (for each schedule type)	Grading Mode*	Class Restriction, if any: (undergraduate only) FR _____ JR _____ SO _____ SR _____	
		Grading Information: Course is eligible for IP (in-progress grading) for: <u>Check all applicable</u>	Course Title Abbreviation:(30 character limit)	
		Thesis _____		
		Internship _____		
		Independent Study _____		
		Practicum _____		

CoRequisites and Prerequisites **See definitions on following page**

Co-Requisite(s): (List only co-requisites. See below for prerequisites and combinations.)

Course Prefix and No.	CED 150
Course Prefix and No.	

Prerequisite(s): (List prerequisites only. List combinations below. Use “and” and “or” literally.) (Specific minimum grade requirements should be placed in () following courses. Default grade is D-.)

Course Prefix and No.	Completion of Background check prior to the first day of the semester. per CARES Candidates will follow the College of Education Licensure and Certification approved procedure. , must be ordered and paid for by the first day of class.
Course Prefix and No.	
Test Scores	
Minimum GPA (when a course grouping or student cumulative GPA is required)	

Co-requisite(s) and/or Prerequisite(s) Combination (Use “and” and “or” literally.) (Specific minimum grade requirements should be placed in () following courses. Default grade is D-.)

Course Prefix and No.	
Test Scores	
Minimum GPA (when a course grouping or student cumulative GPA is required)	

Equivalent Course(s): (credit will not be awarded for both...; or formerly...)

Course Prefix and No.	
Course Prefix and No.	
Course Prefix and No.	

Proposed General Education Element: Please mark (X) in the appropriate Element or Elements

Element 1 (9)	Element 2 (3)	Element 3 (6)	Element 4 (6)	Element 5 (6)	Element 6 (6)	Wellness
1A (3)	2 (3)	3A (3)	4(6)	5A (3)	6 (6)	
1B (3)		3B (3)		5B (3)		
1C (3)		or 3A/B Integrated A&H(6)				