

COURSE APPROVAL/CHANGE DOCUMENT

(See back of form for instructions)

Submit

1. ADDITION REVISION TERMINATION

2. IF REVISION: denote changes (i.e. Title only; Title, CIP and Description; etc.):

Course prefix

3. COURSE NUMBER MH 310

4. COURSE TITLE American Musical Experience

5. IF REVISION: Previous Course No. UI310

Previous Title American Musical Experience

6. FOR ADDITIONS AND REVISIONS -
FIRST TERM/YEAR TO BE OFFERED:

Fall Spring Summer Term 202C

7. FOR TERMINATIONS ONLY -
LAST TERM/YEAR TO BE OFFERED:

Fall Spring Summer Term _____

8. COLLEGE: Holland Coll of Arts & Media

9. DEPARTMENT NAME: Music

10. CIP CODE (Classification of Instructional Program / US Bureau of Labor Statistics): 50.0902

11. FIXED CREDIT HOURS: YES NO

3 Total Credit Hours

3 Lec Contact Hours

0 Lab Contact Hours

0 Other Contact Hours

12. VARIABLE CREDIT HOURS: YES NO

3 Min Total Credit Hours 3 Max Total Credit Hours

3 Min Lec Contact Hours 3 Max Lec Contact Hours

0 Min Lab Contact Hours 0 Max Lab Contact Hours

0 Min Other Contact Hours 0 Max Other Contact Hours

13. CAN THIS COURSE BE TAKEN FOR ADDITIONAL CREDIT: YES NO If YES, total number of times course can be taken 1

14. MAXIMUM ENROLLMENT ALLOWED FOR COURSE: 30 Justification of maximum enrollment:

Classroom space constraints on the River Campus

15. CLASS SCHEDULE TYPE/ FACULTY WORKLOAD: Choose appropriate schedule type: L - Lecture

Faculty Workload: 3 Class schedule type justification:

16. COURSE LEVEL: Undergraduate

17. GRADE TYPE: Standard Grade

18. DEVELOPMENTAL COURSE: YES NO

19. CROSS-LISTED COURSE:

YES WITH _____ NO

20. SPECIAL COURSE FEE? (Must be Board approved)

YES Amount \$ _____ NO

21. Required faculty qualifications to teach this course:

22. GENERAL EDUCATION COURSE: YES NO

If yes, please select one general education category:

If yes, please select up to three general education learning goals that reflect the priorities for student learning in the course. Please rank these in priority order, i.e. 1,2,3 by inserting the numbers/rankings into the boxes:

- ___ General Education Learning Goal 1: Ethical Reasoning
- ___ General Education Learning Goal 2: Global Learning
- ___ General Education Learning Goal 3: Information Literacy
- ___ General Education Learning Goal 4: Written Communication
- ___ General Education Learning Goal 5: Oral Communication
- ___ General Education Learning Goal 6: Critical Thinking
- ___ General Education Learning Goal 7: Quantitative Literacy

If the proposed new or revised course is a General Education course, please provide a short rationale why this course should be considered as a general education course.

Attach the following:

- a) Class syllabus using the syllabus template. [Syllabus Template Link](#)
- b) Memo from Library Dean assessing available and needed library resources and services.
- c) If applicable, memos from Department Chair(s) in affected department(s) stating support or that issues/conflicts are resolved.

COURSE APPROVAL SIGNATURES

Department Chairperson



Educator Preparation Committee

Dean of Kent Library

Barbara C. Glackin

Barbara C. Glackin
Dean of Kent Library
2014-2015

General Education Council

College Council

Graduate Council

To obtain the next signature, save the pdf to your desktop and then email the form as an attachment to the next individual for signing. When submitting the form, the **email must come from your Southeast email account.**

Registrar's Office Use Only

SCACRSE _____ Degree Audit _____ Bulletin _____ Degree Map _____ SHATATR _____