

**UCC/UGC/ECCC**

Proposal for Course Change

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| **[x]  FAST TRACK (Select if this will** **be a fast track item. Refer to**  [***Fast Track Policy***](http://www4.nau.edu/avpaa/UCCPolicy/Agenda_FastTrack_Consent.docx) **for eligibility)** |

# *If the changes included in this proposal are significant, attach copies of original and proposed syllabi in* [*approved university format*](http://www4.nau.edu/avpaa/UCCForms/syllabus.doc)*.*

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| --- | --- | --- | --- |
| 1. Course subject and number: | **HHS 310** | 2. Units: | 4 |

 [**See upper and lower division undergraduate course definitions**](http://www4.nau.edu/avpaa/UCCPolicy/Uplow.doc).

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| 3. College: | Health and Human Services | 4. Academic Unit: | Health and Human Services |

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| 5. Current Student Learning Outcomes of the course.**NEED**  | Show the proposed changes in this column (if applicable). Bold the proposed changes in this column to differentiate from what is not changing, and Bold with strikethrough what is being deleted. *(*[*Resources & Examples for Developing Course Learning Outcomes*](http://www4.nau.edu/avpaa/Assessment/CourseLearningOutcomesPDF_090712.pdf)*)***UNCHANGED**  |

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| 6. Current **title,** **description** and **units**. Cut and paste, in its entirety,from the current on-line academic catalog\* [**http://catalog.nau.edu/Catalog/**](http://catalog.nau.edu/Catalog/).**HHS 310 MEDICAL AND SCIENTIFIC TERMINOLOGY (4)**Description: Introductions and analysis of basic Greek and Latin related words; terms used in the medical and biological sciences. Letter grade only.Units: 4Requirement Designation: Science and Applied ScienceLiberal Studies Essential Skills: Scientific Inquiry | Show the proposed changes in this column **Bold** the proposed changes in this column to differentiate from what is not changing, and **~~Bold with strikethrough~~**what is being deleted.**~~HHS~~ HS 310 MEDICAL AND SCIENTIFIC TERMINOLOGY (4)**Description: Introductions and analysis of basic Greek and Latin related words; terms used in the medical and biological sciences. Letter grade only.Units: 4Requirement Designation: Science and Applied ScienceLiberal Studies Essential Skills: Scientific Inquiry |

\*if there has been a previously approved UCC/UGC/ECCC change since the last catalog year, please copy the approved text from the proposal form into this field.

 7. Justification for course change.

**Currently, this course is housed at the college-level, and the college has requested that it be absorbed into Health Sciences Department.**

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| 8. Effective **BEGINNING** of what term and year? | **Fall 2014** |
| [**See effective dates calendar**](http://www4.nau.edu/avpaa/timelines/1314Effective.xls). |  |

**IN THE FOLLOWING SECTION, COMPLETE ONLY WHAT IS CHANGING**

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| **CURRENT** | **PROPOSED** |
| Current course subject and number:HHS 310 | Proposed course subject and number:**HS 310**  |
| Current number of units: | Proposed number of units: |
| Current short course title: | Proposed short course title (max 30 characters):  |
| Current long course title: | Proposed long course title (max 100 characters):  |
| Current grading option:letter grade [ ]  pass/fail [ ]  or both [ ]  | Proposed grading option:letter grade [ ]  pass/fail [ ]  or both [ ]  |
| Current repeat for additional units: | Proposed repeat for additional units: |
| Current max number of units: | Proposed max number of units: |
| Current prerequisite: | Proposed prerequisite (include rationale in the justification): |
| Current co-requisite: | Proposed co-requisite (include rationale in the justification): |
| Current co-convene with: | Proposed co-convene with: |
| Current cross list with: | Proposed cross list with: |

9. Is this course in any plan (major, minor, or certificate) or sub plan (emphasis)? Yes [ ]  No [x]

 If yes, describe the impact. If applicable, include evidence of notification to and/or response

 from each impacted academic unit.

10. Is there a related plan or sub plan change proposal being submitted? Yes [ ]  No [x]

 If no, explain.

**N/A**

11. Does this course include combined lecture and lab components?            Yes [ ]  No [x]

 If yes, include the units specific to each component in the course description above.

**Answer 12-15 for UCC/ECCC only:**

12. Is this course an approved Liberal Studies or Diversity course?          Yes [x]  No [ ]

    If yes, select all that apply.   Liberal Studies [x]    Diversity [ ]    Both [ ]

13. Do you want to remove the Liberal Studies or Diversity designation?            Yes [ ]  No [x]

 If yes, select all that apply.   Liberal Studies [ ]    Diversity [ ]     Both [ ]

14. Is this course listed in the [**Course Equivalency Guide**](https://aztransmac2.asu.edu/cgi-bin/WebObjects/Admin_CEG.woa/wa/ByInst?inst=NAU)?                      Yes [x]  No [ ]

15. Is this course a [**Shared Unique Numbering**](https://aztransmac1.asu.edu/cgi-bin/WebObjects/ATASS.woa/wa/SUNList?S=X) (SUN) course?                Yes [ ]  No [x]

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| **FLAGSTAFF MOUNTAIN CAMPUS** |  |
| **Scott Galland** | **10/24/2013** |
| Reviewed by Curriculum Process Associate | Date |
|  |  |
| **Approvals**: |  |
| Roger Bounds | 12/01/13 |
| Department Chair/Unit Head (if appropriate) | Date |
|  |  |
| Chair of college curriculum committee | Date |
| **Leslie Schulz** | **12/10/2013** |
| Dean of college | Date |
|  |  |
| **For Committee use only:** |  |
|  |  |
| UCC/UGC Approval | Date |

Approved as submitted: Yes [ ]  No [ ]

Approved as modified: Yes [ ]  No [ ]

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| **EXTENDED CAMPUSES** |  |
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| Reviewed by Curriculum Process Associate | Date |
|  |  |
| **Approvals:**  |  |
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| Academic Unit Head | Date |
|  |
| Division Curriculum Committee (Yuma, Yavapai, or Personalized Learning) | Date |
|  |
| Division Administrator in Extended Campuses (Yuma, Yavapai, or Personalized Learning) | Date |
|  |
| Faculty Chair of Extended Campuses Curriculum Committee (Yuma, Yavapai, or Personalized Learning) | Date |
|  |
| Chief Academic Officer; Extended Campuses (or Designee) | Date |
|  |  |

Approved as submitted: Yes [ ]  No [ ]

Approved as modified: Yes [ ]  No [ ]