

# WINONA STATE UNIVERSITY NOTIFICATIONS

Department \_\_\_\_\_

Date \_\_\_\_\_

If the proposed curricular change involves existing courses and is considered a Notification, complete and submit this form. Refer to Regulation 3-4, *Policy for Changing the Curriculum*, for complete information on submitting proposals for curricular changes.

Please check type of change(s):

☐ Reduction in course number    ☐ Change in grading option    ☐ Change in hours or credits in an independent study course  
☐ Change in course title    ☐ Change in course description\*    ☐ Change in existing major, minor, option, concentration, etc.\*  
☐ Change in prerequisites    ☐ Change in course number within level, e.g. 310 to 350    ☐ Change in delivery method

## A. **Current** Course Information

Course No. \_\_\_\_\_ Course Title \_\_\_\_\_ Credits \_\_\_\_\_

This proposal is for a(n) \_\_\_\_\_ Undergraduate Course \_\_\_\_\_ Graduate Course

Applies to \_\_\_\_\_ Major \_\_\_\_\_ Minor  
                  ☐ Required                      ☐ Required  
                  ☐ Elective                      ☐ Elective

Prerequisites \_\_\_\_\_

Grading \_\_\_\_\_ Grade only \_\_\_\_\_ P/NC only \_\_\_\_\_ Grade and P/NC Option

Frequency of offering \_\_\_\_\_

## **Proposed** Course Information. (Please indicate only proposed changes below.)

Course No. \_\_\_\_\_ Course Title \_\_\_\_\_ Credits \_\_\_\_\_

Prerequisites \_\_\_\_\_

Grading \_\_\_\_\_ Grade only \_\_\_\_\_ P/NC only \_\_\_\_\_ Grade and P/NC Option

Effective date (normally the next semester) \_\_\_\_\_

- B. \*If the proposal requests a change in the course description, please attach a description of the change requested and list both the current and proposed course description. If the proposal requests a change in an existing major, minor, option, concentration, etc., please attach a description of the change(s) requested and list both the current and proposed program listings.

Approved by the Department

\_\_\_\_\_  
Department Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
e-mail address

Notification to College Dean

\_\_\_\_ Yes    \_\_\_\_ No\*

\_\_\_\_\_  
Dean of College

\_\_\_\_\_  
Date

Presented at A2C2 meeting on

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chair of A2C2

Presented at Graduate Council  
meeting on (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chair of Graduate Council

Submitted to Registrar on

\_\_\_\_\_  
Date

Registrar: Please notify department chair via e-mail that  
Notification has been recorded.

\*If a dean has comments on a notification, the dean shall forward the comments to the department.