



**WRIGHT STATE
UNIVERSITY**

**Course Modification
Request**

Use a separate form for each course.

Department _____

Present course number _____

Effective term/year _____

Present course title _____

List course changes on the chart below, using the following number system to indicate the type of change. (For instance, if a catalog description is being changed, put 10 in the number column.)

- 1 Course number
- 2 Title for catalog
- 3 Title for student record
- 4 Title variations
- 5 Credit hours
- 6 Grading*

- 7 General Education credit*
- 8 Prerequisite
- 9 Enrollment restrictions
- 10 Catalog description
- 11 Other (specify)
- * Must include reason for request

No.	Present	Proposed Change

Department Chair _____
Chair _____ Date _____

Forward all copies to:
College Curriculum Committee _____
Chair _____ Date _____

Forward all copies to:
College Dean _____
Dean _____ Date _____

Forward all copies to:
Undergraduate Council to University Undergraduate
Curriculum and Academic Policy Committee _____
Chair _____ Date _____
Faculty Senate _____
Date approved _____

Graduate Council to School of Graduate Studies _____
Dean _____ Date _____

Registrar _____
Date received _____ Date posted _____