

University of Wisconsin Oshkosh
Form C (Effective February 2003)
ACADEMIC PROGRAM ACTION ROUTING SHEET*
For New or Revised Plan (Major/Minor/Emphasis/Option/Certification)

NEW (Attach appropriate UW System documentation)

REVISION - Check all that apply

- Plan Title (include new 30 –character abbreviation)
- Units (credits)
- Required Course
- Elective
- Discontinuance of Academic Plan (attach a rationale statement which addresses changes which have occurred in Plan, faculty expertise, enrollment trends, availability of resources, and/or foci of the discipline)
- Other

Undergraduate

- Plan (Major): _____
 - Emphasis within Major: Ecology and Organismal _____
 - Option within Major Emphasis: _____
- Plan (Minor): _____
 - Emphasis within Minor: _____
 - Option Within Minor Emphasis: _____
- Professional Core (COBA/CON/COEHS): _____

Graduate

- Plan (Program): _____
 - Option within Program: _____

Effective Date: Fall Fall 2008 (Year)

Type of Action Required

We wish to add one course, Biology 355/555 (Field Parasitology) to the list of electives in our Ecology and Organismal Emphasis in our Biology major.

Justification of Proposed Change

Biology 355/555 is a course that did not previously exist and therefore was not on the list of electives. We wish to add it now to give our students more choices in terms of earning elective credits in the Ecology and Organismal Emphasis.

For a new undergraduate or graduate Plan or a change in an existing undergraduate or graduate plan, provide classification and funding source information.

Plan classification: I ___ II ___
Funding Source: New GPR ___ Extramural ___ Base Reallocation ___
Redeployment ___ Enrollment ___ No Change_x_

Classification I: A Plan with significant implications for UW System resource requirements or for interinstitutional planning.
Classification II: A Plan with minimal implications for UW System resource requirements or for interinstitutional planning.

-Continued on other side-

FORM C: ACADEMIC PROGRAM ACTION ROUTING SHEET* -SIDE 2

Does this change or impact the requirements for the existing Plan (Major/Minor/Emphasis/Option/Certification)?

No

Yes- Please explain:

If change impacts a Plan (Major/Minor/Emphasis/Option/Certification) outside the initiating unit, have these units been contacted?

No

Yes- Please list:

There are no units outside of Biology and Microbiology that will be impacted by the change.

Prior to the initiation of the approval process, please contact the Registrar's office at 3007 for consultation about possible impact of proposed changes.

Registrar: _____

Date: _____

APPROVALS**

Department Chair(s): _____ Date: _____

Division Chair: _____ Date: _____

Curriculum Committee: _____ Date: _____

Dean/College: _____ Date: _____

Graduate Studies: _____ Date: _____

APGES Committee Chair (if applicable): _____ Date: _____

APC Committee Chair: _____ Date: _____

Provost and Vice Chancellor: _____ Date: _____

Chancellor: _____ Date: _____

* Refer to UW Oshkosh Academic Program Change Matrix in Faculty Handbook for information about forms and routing instructions.

** For a new Plan, or change in an existing Plan, approval indicates no duplication of other Plans at the University and consultation with other Deans as appropriate. For discontinuance of an academic Plan, consultation with other relevant Deans is necessary.

