**Course Approval Form**

**Action Requested:** (definitions available at website above)
- Create NEW
- X Inactivate
- Modify (check all that apply below)
  - Title (must be 75% similar to original)
  - Repeat Status
  - Schedule Type
  - Prereq/coreq
  - Restrictions
  - Grade Mode
  - Other:

**College/School:**
- CHSS

**Submitted by:**
- Jill Bowen

**Department:**
- Higher Ed

**Ext:**
- 3-8721

**Email:**
- Jbowen4

**Subject Code:**
- HE

**Number:**
- 830

**Effective Term:**
- X Fall
- Spring
- Summer
- Year 2016

**Title:**
- Current Ethics in Higher Education: Personal, Organizational, and Inst Realities
- New

**Credits:**
- (check one) Fixed → 0
- Variable → 0 or
- Lec + Lab/Rct →

**Repeat Status:**
- (check one) Not Repeatable (NR)
- Repeatable within degree (RD)
- Repeatable within term (RT)

**Grade Mode:**
- (check one) Regular (A, B, C, etc.)
- Satisfactory/No Credit
- Special (A, B, C, etc. +IP)

**Schedule Type:**
- Lecture (LEC)
- Lab (LAB)
- Recitation (RCT)
- Internship (INT)
- Independent Study (IND)
- Seminar (SEM)
- Studio (STU)

**Prerequisite(s):**

**Corequisite(s):**

**Restrictions Enforced by System:** Major, College, Degree, Program, etc. Include Code(s).

**Equivalencies:**
- (check only as applicable)
  - YES, course is 100% equivalent to
  - YES, course renumbered to or replaces

**Catalog Copy** (Consult University Catalog for models)

**Description (No more than 60 words, use verb phrases and present tense)**

**Notes (List additional information for the course)**

**Indicate number of contact hours:**

- When Offered:
  - (check all that apply) Fall Summer Spring

- Hours of Lecture or Seminar per week:
- Hours of Lab or Studio:

**Approval Signatures**

- Department Approval
- College/School Approval
- Date
- Date

**If this course includes subject matter currently dealt with by any other units, the originating department must circulate this proposal for review by those units and obtain the necessary signatures prior to submission. Failure to do so will delay action on this proposal.**

**For Graduate Courses Only**

<table>
<thead>
<tr>
<th>Unit Name</th>
<th>Unit Approval Name</th>
<th>Unit Approver’s Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

**Graduate Council Member**

**Provost's Office**

**Graduate Council Approval Date**