Course Changes
Texas A&M University
Departmental Request for a Change in Course
Undergraduate • Graduate • Professional
Submit original form and attachments

Form Instructions
1. Course request type:
   - Undergraduate
   - Graduate
   - First Professional (DDS, MD, JD, PharmD, DVM)
2. Request submitted by (Department or Program Name):
   School of Public Health Epidemiology and Biostatistics
3. Course prefix, number and complete title of course:
   PHEB 690 Epidemiologic Proposal Development
4. Change requested
   a. Prerequisite(s): From:
   b. Withdrawal (reason): No longer required. No enrollment for several years.
   c. Cross-list with:
   d. Change in course title and description. Enter complete current course title and current course description in item 9; enter proposed course title and proposed course description in item 10. Complete item 11a and b for a change in title.
5. Is this an existing core curriculum course?
   - Yes
   - No
6. If grade type is changing for existing course, indicate the new grade type:
   - Grade
   - S/U
   - P/F (CLAD)
7. If this course will be stacked, please indicate the course number of the stacked course:
   - I verify that I have reviewed the FAQ for Export Control Basics for Distance Education (http://export.tamu.edu/resources/export-controls/export-control-basics-for-distance-education).
8. Complete current course title and current catalog course description:
   This course describes the components of a National Institutes of Health grant application, including the scientific, budgetary and human subjects aspects of the proposal. Students develop an epidemiologic research proposal utilizing these guidelines. In a mock study section, the students will serve as reviewers for colleagues’ proposals.
9. Complete proposed course title and proposed catalog course description (not to exceed 50 words):
10. As currently in course inventory:
    - PHEB 690 Epidemiologic Proposal Development
    - Lect. 3.00
    - SCH
    - CH and Fund Code 1076
    - Level 0 0 3 6 3 2
11. Change to:
    - PHEB 690 Epidemiologic Proposal Development
    - Lect. 3.00
    - SCH
    - CH and Fund Code
    - Level 0 0 3 6 3 2

Approval recommended by:

Department Head or Program Chair (Type Name & Sign) Date

Chair, College Review Committee Date

Dean of College Date

Submitted to Coordinating Board by:

Associate Director, Curricular Services Date

Effective Date

Questions regarding this form should be directed to Sandra Williams at 845-8201 or sandra.williams@tamu.edu.
Curricular Services – 08/14
Texas A&M University
Departmental Request for a Change in Course
Undergraduate • Graduate • Professional
Submit original form and attachments

Form Instructions
1. Course request type: ☐ Undergraduate ☒ Graduate ☐ First Professional
2. Request submitted by (Department or Program Name): School of Public Health
3. Course prefix, number and complete title of course: SOPH 690 Thesis Development
4. Change requested
   a. Prerequisite(s): From: ___________________________ To: ___________________________
   b. Withdrawal (reason): no longer required; no enrollment for several years
   c. Cross-list with:

   --- Cross-listed courses require the signatures of both department heads. ---

   d. Change in course title and description. Enter complete current course title and current course description in item 9; enter proposed course title and proposed course description in item 10. Complete item 11a and b for a change in title.

   e. Change in course number, contact hours (lab & lecture), and semester credit hours. Complete item 11a and b. Attach a course syllabus.

5. Is this an existing core curriculum course? ☐ Yes ☒ No

6. If grade type is changing for existing course, indicate the new grade type: ☒ Grade ☐ S/U ☐ P/F (CLMD)

7. If this course will be stacked, please indicate the course number of the stacked course:

   ☐ I verify that I have reviewed the FAQ for Export Control Basics for Distance Education (http://vpr.tamu.edu/resources/export-controls/export-control-basics-for-distance-education).

8. Complete current course title and current catalog course description:

9. Complete proposed course title and proposed catalog course description (not to exceed 50 words):

10. Complete proposed course title and proposed catalog course description (not to exceed 50 words):

11. a. As currently in course inventory:

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Course #</th>
<th>Title (excluding punctuation):</th>
</tr>
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<tr>
<td>SOPH</td>
<td>690</td>
<td>Thesis Development</td>
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<table>
<thead>
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<th>Lab</th>
<th>Other</th>
<th>SCH</th>
<th>CP &amp; Fund Code</th>
<th>Admin. Unit</th>
<th>FLCE Code</th>
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<td>2425</td>
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</tr>
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</table>

   b. Change to:

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Course #</th>
<th>Title (excluding punctuation):</th>
</tr>
</thead>
</table>

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<th>Lec.</th>
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</tr>
</thead>
</table>

   Approval recommended by:

   Antonio Rene, Ph.D. 2/11/12

   Department Head or Program Chair (Type Name & Sign) Date

   Department Head or Program Chair (Type Name & Sign) Date

   (If cross-listed course)

   Submitted to Coordinating Board by:

   Associate Director, Curricular Services

   Questions regarding this form should be directed to Sandra Williams at 845-8201 or sandra.williams@tamu.edu.

Curricular Services – 08/14