

<b><u>SENATE COURSE PROPOSAL FORM</u></b>			(Do not write in this space)		
From: _____ Department	Signed: _____ Department Chair	Date:	<u>ROUTING:</u> Academic Affairs	Initials <b>BAT</b>	Date <b>1/31/08</b>
From: <b>College of Optometry</b> School or College	Signed: <b>Larry J. Davis</b> Dean	Date: <b>01/31/08</b>	Graduate School (if applicable) Senate C & I Reported to Senate Academic Affairs	<b>MEB</b> <b>MEB</b>	<b>3/6/08</b> <b>3/18/08</b>
<b>Please check as appropriate:</b> <input checked="" type="checkbox"/> Drop, <input type="checkbox"/> Add, <input type="checkbox"/> Add to Gen Ed List, OR <input type="checkbox"/> Change: <input type="checkbox"/> number, <input type="checkbox"/> title, <input type="checkbox"/> hours, <input type="checkbox"/> prerequisite, <input type="checkbox"/> description, <input type="checkbox"/> curricular designation					
<b>CURRENT BULLETIN LISTING:</b> Curricular designation: <b>Optometry</b> Course #: <b>8430</b> Full title: <b>Computer Application Optometric Practice</b> Hours: <b>Unknown</b> Prerequisites: <b>Unknown</b> Bulletin description: <b>This course has not been in the bulletin for many years.</b>			<b>PROPOSED BULLETIN LISTING:</b> Curricular designation: _____ Course #: _____ Full title: _____ Hours: _____ Prerequisites: _____ Bulletin description: _____		
Faculty member to consult about proposed change(s): Name: <b>Dr. Larry J. Davis, Dean</b>			Office Phone: <b>5606</b>		
Rationale for proposed drop/add/change: <b>Legacy Course</b>					
For all Gen Ed List additions: <input type="checkbox"/> Complete and attach the General Education Course information sheet. Access at: <a href="https://tomsawyer.umsl.edu/webapps/GeneralEd">https://tomsawyer.umsl.edu/webapps/GeneralEd</a> <input type="checkbox"/> Communication <input type="checkbox"/> Higher Order Thinking <input type="checkbox"/> Managing Information <input type="checkbox"/> Valuing <input type="checkbox"/> Humanities & Fine Arts <input type="checkbox"/> Mathematics <input type="checkbox"/> Life & Physical Sciences <input type="checkbox"/> Social & Behavioral Sciences Note: <b>Only courses below the 3000-level may be designated as fulfilling the requirement.</b>					
If other departments are affected by this proposal, please secure "sign-offs" and indicate for each department the following:					
<b>Department</b>	<b>Contact Person</b>	<b>Phone #</b>			
1.			Proposal received: <input type="checkbox"/> No major objections, <input type="checkbox"/> Objections		
2.			Proposal received: <input type="checkbox"/> No major objections, <input type="checkbox"/> Objections		
3.			Proposal received: <input type="checkbox"/> No major objections, <input type="checkbox"/> Objections		
4.			Proposal received: <input type="checkbox"/> No major objections, <input type="checkbox"/> Objections		
5.			Proposal received: <input type="checkbox"/> No major objections, <input type="checkbox"/> Objections		