WINONA STATE UNIVERSITY NOTIFICATIONS

| Department | Health, Exercise | & Rehabilitative Sciences | | Date <u>January 24, 2014</u> | |
|---|-------------------|--------------------------------------|---|-----------------------------------|--|
| If the proposed curricular change involves existing courses and is considered a Notification, complete and submit this form. Refer to Regulation 3-4, <i>Policy for Changing the Curriculum</i> , for complete information on submitting proposals for curricular changes. | | | | | |
| Please check type of change(s): Reduction in course numberChange in course titleChange in course description*Change in prerequisitesChange in course number within level, e.g. 310 to 350Change in delivery method | | | | | |
| A. Current Course Information | | | | | |
| HERS 340 Course No. | Physiol Course | ogy of Exercise Title | | - 4 Credits | |
| This proposal is for $a(n)_{_{\ell}}$ Undergraduate Course Graduate Course | | | | | |
| Applies to | X Major I | Required Minor Elective E | Required Elective | | |
| Prerequisites | BIOL 212 with a | grade of "C" or better. | | | |
| Grading | X | Grade only | P/NC only | Grade and P/NC Option | |
| Frequency of offer | ring Offered | each semester | - | | |
| Proposed Course Information. (Please indicate only <u>proposed changes</u> below.) | | | | | |
| Course No. | Course | Title | | Credits | |
| Prerequisites | BIOL 212 with a | grade of "C" or better. A m | inimum 2.5 overall GPA is r | equired to enroll in this course. | |
| Grading | | Grade only | P/NC only | Grade and P/NC Option | |
| Frequency of offer | ring | | | | |
| Effective date (normally the next semester) Fall 2014 | | | | | |
| B. *If the proposal requests a change in the course description, please attach a description of the change requested and list both the current and proposed course description. If the proposal requests a change in an existing major, minor, option, concentration, etc., please attach a description of the change(s) requested and list both the current and proposed program listings. | | | | | |
| Approved by the Department | | Department Chair | | January 24, 2014 Date | |
| | | bzeller@winona.edu e-mail address | | | |
| Notification to the College Dean | | Yes No Dean of College | 16/6m | Date | |
| Presented at A2C2 meeting on | | 2/26/2014 Date | Chair of A2C2 | J KC | |
| Presented at Graduate Council meeting on (if applicable) | | Date | Chair of Graduate Council | | |
| Submitted to Registrar on | | 2/27/2014 | Registrar: Please notify department chair via e-mail that Notification has been recorded. | | |
| Date Notification has been recorded. *If a dean has comments on a notification, the dean shall forward the comments to the department. [Revised 7-13-11] | | | | | |