

WINONA STATE UNIVERSITY NOTIFICATIONS

Department Health, Exercise & Rehabilitative Sciences

Date 8/22/13

If the proposed curricular change involves existing courses and is considered a Notification, complete and submit this form. Refer to Regulation 3-4, *Policy for Changing the Curriculum*, for complete information on submitting proposals for curricular changes.

Please check type of change(s):

☐ Reduction in course number ☐ Change in grading option ☐ Change in hours or credits in an independent study course
☐ Change in course title ☐ Change in course description* ☐ Change in existing major, minor, option, concentration, etc.*
☒ Change in prerequisites ☐ Change in course number within level, e.g. 310 to 350 ☐ Change in delivery method

A. Current Course Information

HERS 291 Prevention and Care of Athletic Injuries 2 SH
Course No. Course Title Credits

This proposal is for a(n) ☒ Undergraduate Course ☐ Graduate Course

Applies to ☒ Major ☒ Minor
☒ Required ☐ Required
☐ Elective ☐ Elective

Prerequisites Prerequisites: Current first aid certification and either BIOL 211 - Anatomy and Physiology I (for HERS and PESS majors) or PESS 251 - Sports Science (for coaching minors).

Grading ☒ Grade only ☐ P/NC only ☐ Grade and P/NC Option

Frequency of offering Each semester

Proposed Course Information. (Please indicate only proposed changes below.)

Course No. Course Title Credits

Prerequisites Prerequisites: American Red Cross or American Heart Association current first aid certification and either BIOL 211 - Anatomy and Physiology I (for HERS and PESS majors) or PESS 251 - Sports Science (for coaching minors).

Grading ☐ Grade only ☐ P/NC only ☐ Grade and P/NC Option

Frequency of offering _____

Effective date (normally the next semester) Spring 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. SEE ATTACHED

Approved by the Department BZeller 9/20/13
Department Chair Date

BZeller@winona.edu
e-mail address

Notification to the College Dean ☒ Yes ☐ No 9/23/13
Dean of College Date

Presented at A2C2 meeting on 10/9/13 [Signature]
Date Chair of A2C2

Presented at Graduate Council meeting on (if applicable) _____
Date Chair of Graduate Council

Submitted to Registrar on 10/10/13
Date Registrar: Please notify department chair via e-mail that Notification has been recorded.