

# 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 318    Global Health    3 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 HERS 204 – Personal & Community Health and HERS 288 – Health Perspectives and HERS 316 Introduction to Public Health and CMST 191 Introduction to Public Speaking

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

Frequency of offering Fall semester

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

Course No.    Course Title    Credits

Prerequisites HERS 204 – Personal and Community Health, HERS 288 – Health Perspectives, and CMST 191 Introduction to Public Speaking or CMST 192 Introduction to Speech Communication

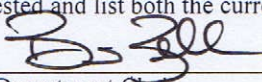
Grading ☐ Grade only    ☐ P/NC only    ☐ Grade and P/NC Option

Frequency of offering Yearly

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.

Approved by the Department

  
Department Chair

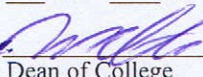
9/20/13

Date

BZeller@winona.edu  
e-mail address

Notification to the College Dean

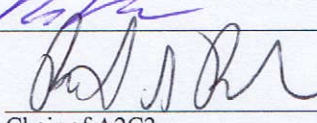
☒ Yes    ☐ No

  
Dean of College

9-23-13  
Date

Presented at A2C2 meeting on

10/9/13  
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.

\*If a dean has comments on a notification, the dean shall forward the comments to the department. [Revised 7-13-11]