WINONA STATE UNIVERSITY
NOTIFICATIONS

Department __Mathematics and Statistics_____ Date ___3/20/2014_____

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.*
_x_ Change in prerequisites __ Change in course number within level, e.g. 310 to 350 _____Change in delivery method

A. **Current** Course Information

_MATH100_____ ___ Survey of Mathematics_____ _____ ___3___
Course No. Course Title Credits

This proposal is for a(n) ___x___ Undergraduate Course _____ Graduate Course

Applies to _____ Major _____ Minor
_____ Required _____ Required
_____ Elective _____ Elective

Prerequisites ___ MATH 050 - Intermediate Algebra or mathematics placement. _____

Grading _____ Grade only _____ P/NC only ___x___ Grade and P/NC Option

Frequency of offering ___Every semester_____

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

_____ _____ _____
Course No. Course Title Credits

Prerequisites _____(none)_____

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

Frequency of offering _____

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 _____ 3/25/14
Department Chair Date

bdeppa@winona.edu
e-mail address

Notification to the College Dean X Yes ___No

Charla S Mutchler 3/28/14
Dean of College Date

Presented at A2C2 meeting on 4/9/2014 _____
Date Chair of A2C2

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

Submitted to Registrar on 4/10/2014 Registrar: Please notify department chair via e-mail that Notification has been recorded.
Date

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