

# WINONA STATE UNIVERSITY

## NOTIFICATIONS

Department Business Administration

Date 2/24/14

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):

<input type="checkbox"/> Reduction in course number	<input type="checkbox"/> Change in grading option	<input type="checkbox"/> Change in hours or credits in an independent study course
<input type="checkbox"/> Change in course title	<input type="checkbox"/> Change in course description*	<input type="checkbox"/> Change in existing major, minor, option, concentration, etc.*
<input checked="" type="checkbox"/> Change in prerequisites	<input type="checkbox"/> Change in course number within level, e.g. 310 to 350	<input type="checkbox"/> Change in delivery method

### A. Current Course Information

MGMT 464	Project Management	3
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 for College of Business majors and minors: Admission to the College of Business and MGMT 334. Prerequisites for non-College of Business majors and minors: Junior standing, MGMT 334, and instructor's permission.

Grading	X	Grade only	P/NC only	Grade and P/NC Option
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Frequency of offering	Fall, Spring, Summer; face-to-face or online
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**Proposed Course Information.** (Please indicate only proposed changes below.)

Course No.	Course Title	Credits
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Prerequisites Prerequisites for College of Business majors and minors: Admission to the College of Business and MGMT 334. Prerequisites for non-College of Business majors and minors: Junior standing and instructor's permission.

Grading \_\_\_\_\_ Grade only \_\_\_\_\_ P/NC only \_\_\_\_\_ Grade and P/NC Option \_\_\_\_\_

Frequency of offering \_\_\_\_\_  
Effective date (normally the next semester) \_\_\_\_\_

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

Kathryn Meaf  
Department Chair

2/27/14  
Date

e-mail address

### Notification to the College Dean

✓ Yes No

Dean of College

Presented at A2C2 meeting on

Date \_\_\_\_\_

Chair of A2C2

Presented at Graduate Council  
meeting on (if applicable)

Date \_\_\_\_\_

Chair of Graduate Council

Submitted to Registrar on \_\_\_\_\_

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]

53/5/14