OFFICE OF ACADEMIC AFFAIRS
COURSE APPROVAL FORM
COURSE CHANGE

College: Nursing
Prefix/Subject Code: NUR
Course Number: 000

Course Title: Nursing Credit by Validation
Credit Hours: 3-40
Cross Listed: 

Nature of Change:
(Check all that apply)

☐ Add to Charger Foundations

☐ Course Title Change
Old Title: 
New Title: 

☐ Course Number Change
Old Number: 
New Number: 

☐ Course Description Change
Old Description: 
New Description: 

☐ Course Requisite Change
Old Requisite: 
New Requisite: 

☐ Course Restriction Change
Old Restriction: 
New Restriction: 

☐ Fee Change
Old Fee: 
New Fee: 

☐ Move to Inactive
☐ Return to Active
☐ Delete

Effective Date: 5/01/2017
Justification of Change:

Credit Hour Change:

We are increasing the validation credit hours to 40. We are able to justify this change as our traditional BSN program has increased credit hours with recent curriculum revisions.

Department Chair: [Signature] 11/28/16
Grad. Council: ________________________

College Dean: [Signature] 11/28/16
Graduate Dean: ________________________

College Curriculum Commitee: ________________________

Undergrad Curriculum Cmte: ________________________
Provost: ________________________

Charger Foundations Cmte: ________________________

Acknowledgements from other units:
Department Chair: ________________________
College Dean: ________________________