## **OFFICE OF ACADEMIC AFFAIRS**

## COURSE APPROVAL FORM COURSE CHANGE



College: Business	Prefix/Subject (		
Course Title: Accounting Information S	Systems Crec	dit Hours: 3	Cross Listed:
Nature of Change: (Check all that apply)		Effective D	<sub>pate:</sub> Fall 2017
☐ Add to Charger Foundations			
☐ Course Title Change			
Old Title:	e .	New Title:	
Course Number Change O	d Number:		New Number:
☐ Course Description Change Old Description:		New Desc	ription:
		8	
■ Course Requisite Change			
Old Requisite:		New Requ	isite:
ACC 212		ACC 2	10
☐ Course Restriction Change			
Old Restriction:		New Restr	iction:
Fee Change O	d Fee:		New Fee:
	ctive Return to Active Delete		

Justification of Change:			
ACC 210 is replacing ACC 211and ACC 212			
Department Chair:	Grad. Council:		
College Dean:	Graduate Dean:		
College Curriculum Commitee:			
Undergrad Curriculum Cmte <u>:</u>	Provost:		
Charger Foundations Cmte:			
Acknowledgements from other units:			
Department Chair:	College Dean:		