Course Change Form

Date of Request: December 6, 2007
Page 1 of 1

Course Revision

Course Title: Intercollegiate Men's Football
Prefix & Num: PEHR 1290

1. Pre-requisite(s): Instructor Permission
Class Hours/Week: *LEC: 0.00 *LBC w/ct: 12.00
Clinical: 0.00 Practicum: 0.00

2. Co-requisite(s): Instructor permission required: Yes
Independent Study: 0.00

Credits: 1.00

3. Semester to be Implemented: Fall, 2008

4. Day ☒ Extended Day ☐
Grade type Regular

Cost Code: Lab Fee: $0.00

5. Additional Fees: $0.00 Potential WLF: 0.00

Explanation of Fees:

6. Is this course designed for a specific group? Yes Who? Football team members

7. Catalog Description: ☐ Now in Print, or ☒ Proposed Below:
Course designed for men who play intercollegiate football. Only those students selected to perform athletically may take this course. Includes instruction in skills and play in intercollegiate football games. This is an activity class designed to give the student-athlete competitive playing time. Students will gain knowledge of the game as well as improve their individual skill level through competition. This course can be repeated for a maximum of 5 credits. Instructor permission required.

8. Are library resources adequate to support this change? Yes If not, how are those resources to be acquired?

9. Are technical and other resources available? No If not, how are those resources to be acquired?

10. Relationship to the curriculum: Would the course fill a G.E. requirement? No If yes, which G.E. area? If it does not fill a G.E. requirement, would the course offer elective credit? Yes

11. Transferability of the course: List comparable courses at other colleges and universities:

<table>
<thead>
<tr>
<th>G.E.</th>
<th>Elective</th>
<th>Course Title</th>
<th>Credits</th>
<th>Prefix &amp; Num.</th>
<th>Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>Football</td>
<td>1</td>
<td>ATHL 1200</td>
<td>U of U</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td></td>
<td></td>
<td></td>
<td>DSC</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td></td>
<td></td>
<td></td>
<td>DSC</td>
</tr>
</tbody>
</table>

Approval Signatures:

Dean: Brenda Aley Date: _________

Academic VP: Date: _________