Course Change Form

Date of Request: September 19, 2007

Page 1 of 1

Course Revision

1. Course Title: Private Applied Music III: Piano
   Prefix & Num.: MUSC 3811
   Instructor permission required: Yes
   Credits: 2.00

2. Pre-requisite(s): MUSC 2811
   Co-requisite(s):
   *LEC: 2.00  *LBC w/cr: 0.00  *LNC w/no cr: 0.00
   Clinical: 0.00  Practicum: 0.00  Independent Study: 0.00

3. Semester to be Implemented: Spring, 2008
   Day: □  Extended Day: □  Grade type: Regular

4. Cost Code:
   Lab Fee: 300  Additional Fees: $0.00  Potential WLF: 0.00

5. Is this course designed for a specific group? No
   Who?

6. Catalog Description: □ Now in Print, or □ Proposed Below:
   Private piano lessons designed for music students. Includes a weekly performance class. Course may be repeated for credit. Prerequisite: MUSC 2811 and instructor permission required. 2 lecture hours per week.

7. Course justification (attach sheets if needed):
   Passed in a previous curriculum meeting. This course change form is to correct hours from LBC to LEC.

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></td>
<td></td>
<td></td>
<td>DSC</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: ___________________________  Date: _____________

Academic VP: ____________________  Date: _____________