Course Change Form

Date of Request: February 26, 2009
Page 1 of 1

Course Revision

1. Course Title: String Methods
   Prefix & Num: MUSC 1750

2. Pre-requisite(s): 
   Co-requisite(s): 
   Instructor permission required: No
   Class Hours/Week: 
   *LEC: 0.00  
   *LBC w/cr: 2.00  
   *L NC w/no cr: 0.00  
   Credits: 1.00
   Clinical: 0.00  
   Practicum: 0.00  
   Independent Study: 0.00

3. Semester to be Implemented: Fall, 2009  
   Day ☒  
   Extended Day ☐  
   Grade type Regular

4. Cost Code: 
   Lab Fee: 0  
   Additional Fees: $0.00  
   Potential WLF: 0.00

5. Is this course designed for a specific group? Yes  
   Who? Music Majors

6. Catalog Description: ☒ Now in Print, or ☐ Proposed Below:
   This course is required for Instrumental Music Education majors. It also fulfills music elective credit for other music degree emphases. It covers the education and methodologies of group string instruction in a public school setting. Classes will consist of lectures, hands-on playing, and assembling materials for future reference. Course objectives include mastery of right and left hand techniques for string instruments as well as ideas for incorporating improvisation, arranging, and use of music technology in the curriculum. Those who complete the course will be prepared to teach a string class grades K-12. 4 lab hours a week.

7. Course justification (attach sheets if needed):
   This form changes the course name and updates the course description.

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? Yes  
   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>DSC</td>
<td></td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td></td>
<td></td>
<td>DSC</td>
<td></td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td></td>
<td></td>
<td>DSC</td>
<td></td>
</tr>
</tbody>
</table>

Approval Signatures:

Department Chair: [Signature]  
Date: 3/12/09

Associate Dean/Dean: [Signature]  
Date: 3/12/09

Curriculum Chair:  
Date: 

Academic VP:  
Date: 