Course Change Form

Date of Request: February 23, 2009
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Course Revision

1. Course Title: Private Applied ◀ Music Education Major: Guitar  
   Prefix & Num: MUSC 4815

2. Pre-requisite(s): MUSC 3815  
   Co-requisite(s):  
   Instructor permission required: No  
   Class Hours/Week:  
   *LBC: 1.00  
   *LBC w/cr: 0.00  
   *LNC 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: FPA 106  
   Lab Fee: 350  
   Additional Fees: $0.00  
   Potential WLF: 0.00  

   Explanation of Fees: fee covers instructor time

5. Is this course designed for a specific group? Yes  
   Who? music majors

6. Catalog Description: ☐ Now in Print, or ☒ Proposed Below:
   Private guitar instruction designed for music majors. Course may be repeated once for a maximum of 2 credits. Fee required. Student required to perform at convocation once a semester. A jury examination is required at the conclusion of each semester. Includes one 50-minute lesson per week, and a one-hour performance class per week.

7. Course justification (attach sheets if needed):
   Adjusting course description to reflect input from consultant and Regents.

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:

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<th>G.E.</th>
<th>Elective</th>
<th>Course Title</th>
<th>Credits</th>
<th>Prefix &amp; Num</th>
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Approval Signatures:

Department Chair: [Signature]  
Date: 2/23/09

Associate Dean/Dean: [Signature]  
Date: 3/15/09

Curriculum Chair: ____________________________  
Date: __________

Academic VP: ____________________________  
Date: __________