Course Change Form

Date of Request: October 13, 2009

Course Revision

Originator: Philip Lee
Department: Business
Replacement Course ID:

1. Course Title: **Intro to Leadership II Lab**  
   Prefix & Num: MILS 1211

2. Pre-requisite(s): MILS1210, MILS1212  
   Instructor permission required: No  
   Co-requisite(s): MILS1210, MILS1212  
   Instructor permission required: No  
   Class Hours/Week:  
   *LEC: 0.00  
   *LBC w/ cr: 2.50  
   *LNC w/ no cr: 0.00  
   Credits: 1.00  
   Clinical: 0.00  
   Practicum: 0.00  
   Independent Study: 0.00

3. Semester to be Implemented: Spring, 2010  
   Day ☐  
   Extended Day ☐  
   Grade type: Regular

4. Cost Code: MIL100  
   Lab Fee: $0.00  
   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:  
   Studies the dynamics of leadership of groups and individuals in a field environment. Provides opportunities for students to apply leadership principles and techniques in challenging situations to further prepare them for leadership positions in the military or in any career field they choose. Lab fee required. Corequisite: MILS1210 and MILS1212. 2 and one half lab hours per week. Course taught in the Spring.

7. Course justification (attach sheets if needed):  
   Corequisite MILS 1212 added to reflect physical training aspect of course sequence not previously included for credit.

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

Department Chair: ____________________________  Date: __________

Associate Dean/Dean: ____________________________  Date: __________

Curriculum Chair: ____________________________  Date: __________

Academic VP: ____________________________  Date: __________