Course Addition

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Prefix &amp; Num.</th>
<th>Replacement Course ID</th>
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<tbody>
<tr>
<td>Military Fitness</td>
<td>MILS121</td>
<td>MILS1212</td>
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</table>

2. Pre-requisite(s): MILS1210, MILS1211
   Co-requisite(s): 
   Instructor permission required: No
   Class Hours/Week: 
   *LEC: 0.00 *LBC w/cr: 2.00 *LNC w/no cr: 0.00 Credits: 1.00
   Clinical: 0.00 Practicum: 0.00 Independent Study: 0.00

3. Semester to be Implemented: 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 [X] Proposed Below:
   For Army ROTC students and all other interested students. Uses the Army Physical Fitness Test to evaluate the student’s performance and improvement in the areas of flexibility, strength, and endurance. Includes instruction in foot care and road marching techniques. Repeats are required. Corequisites: MILS1210 and MILS1211. 2 lab hours per week. Course taught in the Spring.

7. Course justification (attach sheets if needed):
   This lab with physical training was not reflected in the prior course sequence.

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>GE</th>
<th>Elective</th>
<th>Course Title</th>
<th>Credits</th>
<th>Prefix &amp; Num.</th>
<th>Institution</th>
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<tr>
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<td>[X]</td>
<td>Military Fitness</td>
<td>1</td>
<td>MILS 143R</td>
<td>UVU</td>
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<td>DSC</td>
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<td>DSC</td>
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Approval Signatures:

Department Chair: ____________________________ Date: __________

Associate Dean/Dean: ____________________________ Date: __________

Curriculum Chair: ____________________________ Date: __________

Academic VP: ____________________________ Date: __________