Course Change Form

Date of Request: October 5, 2009
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Course Replacement

Prefix & Num: MUSC 3230

1. Course Title: **Southwest Chorale**

2. Pre-requisite(s): **audition**
   - ENS: 3.00
   - ELC: 3.00
   - LBC w/cr: 0.00
   - LNC w/no cr: 0.00
   - Clinical: 0.00
   - Practicum: 0.00
   - Independent Study: 0.00
   - Credits: 1.00

3. Semester to be Implemented: **Fall, 2010**
   - Day
   - Extended Day
   - Grade type: **Regular**

4. Cost Code:
   - Lab Fee: $0.00
   - Additional Fees: $0.00
   - Potential WLF: 3.00

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

6. Catalog Description: **☑** Now in Print, or **☐** Proposed Below:
   - A large ensemble choral music experience designed primarily for members of the community interested in musical enrichment. The Chorale frequently performs with the Southwest Symphony Orchestra. The student will develop advanced concepts of good choral singing including balance, blend, intonation, tone, and interpretation while experiencing a wide variety of musical styles from the Renaissance to the twentieth-century (classical and popular styles) with an emphasis on major choral and orchestral works. Students will actively participate in regular rehearsals and public performances. Fulfills elective credits and may be repeated for credit.
   - Prerequisite: Audition for instructor. 2 ensemble hours per week.

7. Course justification (attach sheets if needed):
   - *give all ensembles upper division numbers*

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>
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Approval Signatures:

Department Chair: [Signature]

Date: 10/6/09

Associate Dean/Dean: [Signature]

Date: 10-6-09

Curriculum Chair: [Signature]

Date: 

Academic VP: [Signature]

Date: 
