

**SOUTHERN CONNECTICUT STATE UNIVERSITY**  
**School of Graduate Studies**

**Graduate Course Minor Revision**

This form is to be used for non-substantive changes to graduate courses. Revisions that change the purpose, nature, or essential content of a course must be approved through the Graduate Council Curriculum Committee. Minor course changes will go into effect with the publication of the next graduate catalog.

**Proposed Revision**

_____ Title	_____ Course Number
_____ Prerequisites	_____ Academic Credits
_____ Special Conditions	_____ Faculty Credits
_____ Student Enrollment	_____ Student Credits
_____ Catalog Descriptions	_____ Contact Hour
_____ Other	

- COURSE NAME & NUMBER:
  
- CHANGE FROM:
  
  
- CHANGE TO:
  
  
- JUSTIFICATION FOR CHANGE: (use back of form if more space is needed)

**Approvals**

\_\_\_\_\_ Date  
Department Chairperson

\_\_\_\_\_ Date  
School Dean

**Please forward form to the School of Graduate Studies, EN B 110**

Noted in Student Information System \_\_\_\_\_  
Date