Return completed form as needed to: Statewide Course Numbering System Florida Department of Education 325 West Gaines Street, Room 1454 Tallahassee, Florida 32399-0400 (850) 488-6402, SunCom 278-6402

Florida Department of Education Statewide Course Numbering System COURSE TERMINATION OR CHANGE TRANSMITTAL FORM

(See instructions on reverse side)

PART I: TO BE COMPLETED BY	THE INSTITUTION			
Institution	Institution Code	Instructional Unit or	Department	
Current SCNS Course Identification: Discipline (SMA) Institution's Course Title:	Prefix Level	Course Num	ber Lab Code	
PART II: REQUESTED ACTIONS				
Terminate Current Course				
NEW SCNS Course Identification: (Convew Discipline (SMA)	Prefix Level _ cable):) Course Number	Lab Code	
EFFECTIVE DATE FOR CHANGES:			Change To	
Other Items to Change	Change From		Change To	
Amount of Credit Type of Credit				
Total Clock Hours				
Type of Degree				
Gordon Rule				
General Ed Requirement		(areas)	(areas)	
Prerequisites/Corequisites				
Change of Course Description (Course sy	nuous must oo utuusiooj.			
Name, Faculty Contact and Telephone Number		Signature, Institution Contact Date		
PART III: TO BE COMPLETED BY FACULTY DISCIPLINE COMMITTEE REPRESENTATIVE				
Approved Course Classification (Prefix, Number, Lab Code): If not the same as recommended by institution, please explain:				
SCNS Course Title (if new)				
Decade Title (if new)				
Century Title (if new)				
Signature, Faculty Discipline Committee Representative			Date	
PART IV: SCNS STAFF USE ONLY				
Signature, SCNS Staff		Entered (Correspondence Number	
i dikilature, delib didil	Date		ANY AND ATTENDED TIMETERS.	



COURSE TERMINATION OR CHANGE TRANSMITTAL FORM Instructions for Completion of Parts I & II

The Course Termination or Change Transmittal Form is used for transmitting the following course information to the Statewide Course Numbering System (SCNS):

- 1. Prefixes and numbers of courses which will no longer be offered by the institution.
- 2. Additional course information to be recorded in the SCNS inventory.
- 3. Supporting documentation for review by the Faculty Discipline Coordinator for possible reassignment of prefix and course number.

[NOTE: Major revisions in course content will require a new course number assignment. Please terminate the current course and add the new course.]

All information requested on this form is necessary for the efficient and timely maintenance of the SCNS inventory. Thus, all items on Part I of this form must be completed before it is forwarded to the Florida Department of Education (DOE). An updated course syllabus must be attached in cases where course content has changed or a new prefix or number is requested.

Part I

The following instructions and definitions are provided to clarify items to be completed on the Course Termination or Change Transmittal Form.

Institution: Normally, an institutional acronym is adequate. An institution having a non-unique acronym should provide the institution name.

Institution Code: Postsecondary institutions should indicate the Institution Code which can be obtained from the SCNS Institution Contact or the SCNS Handbook.

Instructional Unit or Department: Academic unit responsible for teaching the course.

Current SCNS Course Identification:

Discipline (SMA): A three digit code representing a broad Subject Matter Area. SCNS staff will enter this number if the appropriate number is not known.

Prefix: A three letter code indicating placement of a course within the discipline.

Level: A one digit code preceding the course number which indicates the level (e.g., freshman, sophomore, etc.) at which the course is to be taught. This number is to be recommended by the institution according to state and institution policy.

Course Number: A three digit code indicating the specific content of the course based on the SCNS taxonomy and course equivalency profiles.

Lab Code: This code is left blank if the course is a lecture course (has no laboratory component). The letter "C" may be used to indicate a combination of lecture and laboratory. An "L" indicates a laboratory course for which there may or may not be associated an associated lecture course.

Institution's Course Title: The title of the course as it appears in the catalog.

Part II

Requested Actions

Terminate Current Course: Check the "yes" box if the course is to be terminated and enter the effective date.

Course Change Information: If changes are to be made in a course's identification, list changes only. All changes may affect the course prefix and number. All changes are subject to approval of the appropriate Faculty Discipline Coordinator based on the SCNS taxonomy and classification system.

Type of Degree: V.C. - Vocational Certificate (PSAV), A.T.D. - Advanced Technology Diploma; T.C. - Technical Certificate, A.T.C. - Advanced Technical Certificate; A.A.S. - Associate in Applied Science; A.S. - Associate in Science; A.A. - Associate in Arts. For category of "Other", describe the intended registrants: e.g., law enforcement officers, registered nurses, retail merchants, etc.

Change of Course Description: Provide a brief narrative description of the content of the course as it will appear in the catalog. A course syllabus including a course outline of major topics must be attached for changes to courses and changes to course content.

Effective Date: Provide month, day, and year of term in which the change or termination will be first effective.

Name, Faculty Contact, and Telephone Number: The name and telephone number of the person who can be contacted if there is a question concerning this course.

Signature of Institution Contact: All forms must be signed and dated by the institution's designated SCNS contact person.

DO NOT COMPLETE Parts III and IV.

Should you have questions concerning the completion of this form, please call your Institution Contact or call the SCNS staff at (850) 488-6402 or SunCom 278-6402.