**FLORIDA ATLANTIC UNIVERSITY**

**Graduate Programs—COURSE CHANGE REQUEST**

<table>
<thead>
<tr>
<th>DEPARTMENT: SOCIOLOGY</th>
<th>COLLEGE: DOROTHY F SCHMIDT COLLEGE OF ARTS AND LETTERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>COURSE PREFIX AND NUMBER: SYA 6117</td>
<td>CURRENT COURSE TITLE: CRITICAL PERSPECTIVES IN SOCIAL THEORY</td>
</tr>
</tbody>
</table>

**CHANGE(S) ARE TO BE EFFECTIVE (LIST TERM):**

<table>
<thead>
<tr>
<th>CHANGE TITLE TO:</th>
<th>CHANGE PREREQUISITES/Minimum Grades to*:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHANGE PREFIX FROM:</td>
<td>CHANGE COURSE NO. FROM:</td>
</tr>
<tr>
<td>CHANGE COURSE NO. FROM:</td>
<td>CHANGE CREDITS FROM:</td>
</tr>
<tr>
<td>CHANGE GRADE FROM:</td>
<td>CHANGE DESCRIPTION TO:</td>
</tr>
</tbody>
</table>

**TERMINATE COURSE (LIST FINAL ACTIVE TERM):**

**Admission to graduate study or permission of the instructor**

**Change Corequisites to*:**

**Change Registration Controls to:**

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**Attach syllabus for ANY changes to current course information.**

Should the requested change(s) cause this course to overlap any other FAU courses, please list them here.

Please consult and list departments that might be affected by the change(s) and attach comments.

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**Faculty contact, email and complete phone number:**

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**Approved by:**

Department Chair: [Signature]

College Curriculum Chair: [Signature]

College Dean: [Signature]

UGPC Chair: [Signature]

Graduate College Dean: [Signature]

UFS President: [Signature]

Date: 3/27/19

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3. Consent from affected departments (attach if necessary)

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Email this form and syllabus to [UGPC@fau.edu](mailto:UGPC@fau.edu) one week before the University Graduate Programs Committee meeting so that materials may be viewed on the UGPC website prior to the meeting.

*FAUchange—Revised September 2012*