Florida Institute of Technology

CHANGING RESTRICTIONS OR CREDITS IN A COURSE

The addition or removal of any restriction or change in credit hours in a course requires that this form, accompanied by any supporting documentation, be completed and approved as indicated below.

COLLEGE: Engineering

DEPARTMENT: Electrical and Computer Engineering

REQUEST IS FOR CHANGE IN COURSE E C E 3 4 4 2 Electromagnetic Waves

Prefix Number Course Title Term

TO BE INCLUDED IN 20 1 Q 120 1 1 CATALOG AND EFFECTIVE IN THE BANNER SYSTEM FOR Fall 2011 SPRING 2011 TERM

IS REQUEST FOR A CHANGE IN CREDITS FOR COURSE LISTED ABOVE? ☐ Yes ☒ No If yes, current credits requested credits

IS REQUEST TO CHANGE RESTRICTIONS FOR COURSE LISTED ABOVE? ☐ Yes ☐ No If yes, please check all that apply:

☒ Add ☐ Remove ☒ Prerequisite ☐ Corequisite E C E 3 4 4 1 and ☐ or

☐ Add ☐ Remove ☒ Prerequisite ☐ Corequisite M T H 2 0 0 1 and ☐ or

☐ Add ☐ Remove ☒ Prerequisite ☐ Corequisite P H Y 2 0 0 2 and ☐ or

☐ Add ☐ Remove ☐ Other Restrictions ☐ Yes ☐ No If yes, please list below:

APPROVALS: Upon completion of appropriate department approvals, submit form to Chair, Graduate Council, or Chair, Undergraduate Curriculum Committee for approval below and forward to Catalog Director.

1) Braddok 4/26/10

Date

2) N.M. Klinger 4/26/10

Date

3) Chair, Undergraduate Curriculum Committee 4-27-10

4) Chair, Graduate Council

Date

Chair, Undergraduate Curriculum Committee

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RGR-008-1069
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COLLEGE: Engineering

DEPARTMENT: Electrical and Computer Engineering

REQUEST IS FOR CHANGE IN COURSE: E C E 4 2 4 1 System Design 1

Prefix Number

Course Title: System Design 1

SPRING 2011 TERM

TO BE INCLUDED IN 20 1 0 / 20 1 1 CATALOG AND EFFECTIVE IN THE BANNER SYSTEM FOR F A L L 2 0 1 0 TERM

IS REQUEST FOR A CHANGE IN CREDITS FOR COURSE LISTED ABOVE? ☐ Yes ☑ No If yes, current credits requested credits

IS REQUEST TO CHANGE RESTRICTIONS FOR COURSE LISTED ABOVE? ☑ Yes ☐ No If yes, please check all that apply:

☐ Add ☐ Remove ☑ Prerequisite ☐ Corequisite E C E 3 2 4 0 ☐ and ☐ or

Prefix Number

☐ Add ☐ Remove ☐ Prerequisite ☐ Corequisite ☐ and ☐ or

Prefix Number

☐ Add ☐ Remove ☐ Prerequisite ☐ Corequisite ☐ and ☐ or

Prefix Number

☐ Add ☐ Remove ☑ Other Restrictions ☑ Yes ☐ No If yes, please list below:

senior standing

APPROVALS: Upon completion of appropriate department approvals, submit form to Chair, Graduate Council, or Chair, Undergraduate Curriculum Committee for approval below and forward to Catalog Director.

1) ___________________________ 4/21/10

Chair, Graduate Council

2) ___________________________ 4/21/10

Department Head/Program Chair OR

3) ___________________________ 4/22/10

Dean or Associate Dean

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