

**UNDERGRADUATE COUNCIL
Request for Change(s)**

Originating unit requesting change

RELI

Type of Change requested:

- | | | |
|---|---|---|
| <input type="checkbox"/> Course number(s) | <input type="checkbox"/> Course prerequisite(s) | <input type="checkbox"/> Program title |
| <input type="checkbox"/> Course title | <input type="checkbox"/> Drop course(s) | <input type="checkbox"/> Program description |
| <input type="checkbox"/> Course description | <input checked="" type="checkbox"/> Drop program(s) | <input type="checkbox"/> Program requirements |

Semester and year change(s) take effect:

Spring 21

Appropriate computer abbreviation if
course title is more than 30 spaces:

Briefly summarize the change requested:

It is proposed herewith to drop the Minor in Jewish Studies.

Programs Only

Current Title: _____

New Title: _____

Current Code: _____ Proposed New Code (list 2): _____ or _____
(ex: INDE-BFA)

Can have second major: ___ Yes ___ No

Current CIP Code: _____

Does the change require a new or change in CIP code? ___ Yes ___ No

If yes, what is the proposed CIP code? _____

*for reference, please visit: <https://nces.ed.gov/ipeds/cipcode/resources.aspx?y=56>

Catalog copy

Present catalog copy (paste-up from catalog is acceptable).

Proposed change(s). (Include exact catalog copy as desired. Underline changes)

Request for Changes

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1. What is the justification for the change(s) requested?
Since its creation in 2014, no student elected the Minor in Jewish Studies. In addition, several of the courses that were initially listed in this Minor are no longer offered.

 2. If applicable, explain how the change(s) will affect the current program outcomes and assessment mechanisms.
N/A

 3. **Faculty Resources:** How will the unit provide faculty support for this change and any other impact this change may have on other current departmental listings.
N/A
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4. **Educational Resources:** Will this change require additional resources not currently available (e.g. space, equipment, library, other)? YES
If yes, list additional resources needed. NO
N/A

5. If this change affects other units of the University, include a statement signed by the chairperson(s) of the affected unit(s).
N/A

6. If cross-listed, provide evidence of approval by all curriculum committees appropriate to both the originating and cross-listed units.
N/A


Approval signature of chairperson of originating unit
