**Curriculum Proposal**

Please type or select the requested information. Print completed forms, add appropriate paper attachments, and route through MSU's curricular process for recommendations and decisions.

<table>
<thead>
<tr>
<th>College: Arts and Humanities</th>
<th>Proposal # 240</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department: Theatre and Dance</td>
<td>Effective Date of Change:</td>
</tr>
<tr>
<td>Program: CIP #</td>
<td>Academic Year 05-06</td>
</tr>
<tr>
<td>Type of Change: COURSE PROPOSALS</td>
<td>(For Office Use Only)</td>
</tr>
<tr>
<td>Proposed: Change in Title</td>
<td>Course Designator and Number</td>
</tr>
<tr>
<td>Title Current: Sound Design</td>
<td>THEA 475/575</td>
</tr>
<tr>
<td>Title Proposed: Sound Design I</td>
<td>Number of Credits 3</td>
</tr>
<tr>
<td>24-Char. Abbrev: Sound Design I</td>
<td>(if applicable)</td>
</tr>
</tbody>
</table>

Include a course or program description for the Bulletin (30-40 words maximum for courses, 100 for programs):

Rationale or Justification for change:

We are adding a course to follow this one.

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***For General Education or Cultural Diversity Courses Only***

<table>
<thead>
<tr>
<th>General Education Course:</th>
<th>Cultural Diversity Course:</th>
</tr>
</thead>
<tbody>
<tr>
<td>GE Category #</td>
<td>GE Category Name (Maximum of 3 Categories)</td>
</tr>
<tr>
<td>N/A</td>
<td>Core (At least 75% devoted to topics of race, gender, sexual orientation, age, class, and disabilities as they occur in United States Society.)</td>
</tr>
<tr>
<td>N/A</td>
<td>Related (At least 25% devoted to the above topics or to a global perspective on topics related to African American, Asian, Hispanic, and Native American inhabitants of the United States.)</td>
</tr>
</tbody>
</table>

* For Writing Intensive Courses, attach a description of the kind and quantity of writing.

* For Upper Division Courses, include a description of the respects in which it is broad and general rather than narrow and specific, and so suitable as GE.

Attach paper copies of the following:

a. Syllabus or course outline.
b. Course's student learning outcomes associated with each GE competency or CD designation.
c. List of strategies to be used to assess students' achievement of each GE competency or CD designation.

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***For New Courses***

<table>
<thead>
<tr>
<th>Instructional Type: Lecture</th>
<th>Course will be offered:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fall Semester</td>
</tr>
<tr>
<td>Grading Format: Grade P/N</td>
<td>Spring Semester</td>
</tr>
<tr>
<td>Pre- or Co-requisites:</td>
<td>Summer Session</td>
</tr>
</tbody>
</table>

If course content or title is similar to courses in other departments. (Attach copy of letter of agreement with other program(s) contacted. Indicate the nature of the discussions and/or resolution of differences or potential conflicts.)

Attach paper copies of the following:

a. Syllabus or course outline.
b. Course's student learning outcomes.
c. A list of resources required to offer and support this course.
d. A description of how teaching this course will affect department staffing.
e. If 400/500 level course, an explanation of added expectations of graduate students.
### Signature Page

**Department**
- Recommended (Category/ies__________)
- Not Recommended (Category/ies__________)
  - Department Chair
  - Date
  - Comments:

**College Curriculum Committee**
- Recommended (Category/ies__________)
- Not Recommended (Category/ies__________)
  - Committee Chair
  - Date
  - Comments:

**College Dean**
- Recommended (Category/ies__________)
- Not Recommended (Category/ies__________)
  - Dean
  - Date
  - Comments:

**General Education Subcommittee**
- Recommended (Category/ies__________)
- Not Recommended (Category/ies__________)
  - General Education Subcommittee Chair
  - Date
  - Comments:

**Undergraduate Curriculum and Academic Policy Committee**
- Recommended (Category/ies__________)
- Not Recommended (Category/ies__________)
  - UCAP Faculty Chair
  - Date
  - Comments:

**Faculty Association Graduate Committee**
- Recommended
- Not Recommended
  - Faculty Association Graduate Chair
  - Date
  - Comments:

**Graduate Dean**
- Recommended
- Not Recommended
  - Graduate Dean
  - Date
  - Comments:

**Academic Affairs Council**
- Recommended (Category/ies__________)
- Not Recommended (Category/ies__________)
  - Assistant Vice President
  - Date
  - Comments:

**Senior Vice President and Vice President for Academic Affairs**
- Approved (Category/ies__________)
- Not Approved (Category/ies__________)
  - Sr. Vice President / Vice Pres. Academic Affairs
  - Date
  - Comments: