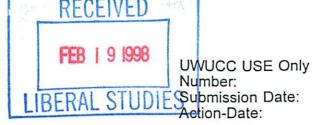
LSC Use Only Number: Submission Date: Action-Date:



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	CURRICULUM PROPO University-Wide Undergradua					
١.	CONTACT	·				
	Contact Person <u>Dr. B. Gail Wilson</u>	Phone 3210				
	Department <u>Communications Media</u>					
l.	PROPOSAL TYPE (Check All Appropriate Lines)					
	X COURSE E1	ectronic Field Production Suggested 20 character title				
		Course Number and Full Title				
	Course Revision	Course Number and Full Title				
	Liberal Studies Approval + for new or existing course	Course Number and Full Title				
	X Course Deletion CM 452 Ele	Ctronic Field Production Course Number and Full Title				
	Number and/or Title ChangeOld Number and/or Full Old Title					
		New Number and/or Full New Title				
	Course or Catalog Description Ch	Course Number and Full Title				
	PROGRAM: Major	Minor Track				
	New Program*	Program Name				
	Program Revision*	Program Name				
	Program Deletion*					
	Title Change	Program Name				
	rido ondrigo	Old Program Name				
I.	Approvals (signatures and date) Begin 12/15/97 Department Curriculum Committee	New Program Name 12/15/97				
	V	College Dean 2/17/98				
	+ Director of Liberal Studies (where applicable)	*Provost (where applicable)				