

NORTH CAROLINA STATE UNIVERSITY  
**COURSE ACTION FORM**

For instructions, please consult: [http://www.ncsu.edu/provost/academic\\_programs/courses/attdoccsinst.html](http://www.ncsu.edu/provost/academic_programs/courses/attdoccsinst.html)

<b>TYPE OF PROPOSAL:</b>	
New Course	_____
Course to be dropped	_____
Course Review	___X_
Course Revision*	___X_
GER List Action	___X_
Dual-level Course	_____
<b>* REVISION IN:</b>	
Prefix/Number	_____
Title/Abbreviated Title	_____
Scheduling	_____
Credit Hours/Contact Hours	_____
Grading Method	_____
Pre/Corequisite	_____
Restrictive Statement	_____
Catalog Description	_____
Content	_____
Student Learning Objectives	_____

Proposed Effective Date: ___/___/___
Approved Effective Date: ___/___/___

DEPARTMENT/PROGRAM \_\_\_\_\_ Mathematics \_\_\_\_\_

COURSE PREFIX \_\_\_\_\_ MA \_\_\_\_\_ NUMBER \_\_\_\_\_ 121 \_\_\_\_\_

PREVIOUS PREFIX/NUMBER \_\_\_\_\_

COURSE TITLE \_Elements of Calculus\_ \_\_\_\_\_

ABBREVIATED \_\_\_\_\_ (18 including spaces)

SCHEDULING: Fall \_\_, Spring \_\_, Summer \_\_, Every Year \_\_X\_\_  
Alt. Year Odd \_\_\_\_ Alt. Year Even \_\_\_\_ Other \_\_\_\_\_

CREDIT HOURS \_\_ 3 \_\_\_\_ OFFERED BY DISTANCE EDUCATION ONLY \_\_\_\_\_

CONTACT HOURS: Lecture/Recitation \_\_3\_\_ Seminar \_\_\_\_ Laboratory \_\_\_\_ Problem \_\_\_\_  
Studio \_\_\_\_ Independent Study/Research \_\_\_\_ Internship/Practicum/Field Work \_\_\_\_

GRADING: \_ABCD\_ or S/U \_\_\_\_ DATE OF LAST ACTION: \_\_\_\_\_

PREREQUISITE(S) \_\_\_\_\_

COREQUISITE(S) \_\_\_\_\_

PRE/COREQUISITE for Following Course(s) \_\_\_\_\_

\_\_\_\_\_

RESTRICTIVE STATEMENT(S) \_\_\_\_\_

\_\_\_\_\_

CATALOG DESCRIPTION (Limit to 80 words):

For students who require only a single semester of calculus. Emphasis on concepts and applications of calculus, along with basic skills. Algebra review, functions, graphs, limits, derivatives, integrals, logarithmic and exponential functions, functions of several variables, applications in management, applications in biological and social sciences.

CURRICULA/MINORS FOR WHICH COURSE IS DESIGNED:

Required: \_\_\_\_\_

Elective: \_\_\_\_\_

GER LIST(S): \_\_\_\_\_ Mathematics \_\_\_\_\_

INSTRUCTOR RESPONSIBLE FOR COURSE/RANK: \_\_\_\_\_ **John Griggs, Ph.D.** \_\_\_\_\_

ANTICIPATED ENROLLMENT/SEMESTER: \_\_\_\_\_ 900 \_\_\_\_\_ Maximum No./Sect.: \_\_\_\_\_ 9 \_\_\_\_\_ Multiple Sections: Yes \_\_\_X\_\_\_ No \_\_\_\_\_

<b>DOCUMENTATION AS REQUIRED:</b>	
<i>Please number all documentation pages attached to course action form.</i>	
Course Justification	_____
Proposed Revision(s) with Reasons	_____
Enrollment for last 5 years	_____
Resources Statement	___X_
Consultation with other Departments	___X_
GER Course Documentation:	
GER category objectives	___X_
GER student learning outcomes	___X_
Means of assessing GER outcomes	___X_
Syllabus (Current and Proposed)	___X_

**RECOMMENDED BY:**

\_\_\_\_\_  
Head, Department/Program Date

**ENDORSED BY:**

\_\_\_\_\_  
Chair, College Courses & Curricula Committee Date

\_\_\_\_\_  
College Dean Date

\_\_\_\_\_  
Chair, University Courses & Curricula Committee Date

\_\_\_\_\_  
Chair, Council on Undergraduate Education Date

**APPROVED:**

\_\_\_\_\_  
Provost's Office Date