

KINGSBOROUGH COMMUNITY COLLEGE  
The City University of New York

CURRICULUM DATA TRANSMITTAL SHEET

KCC PROUSEP1914M10-32  
23=07M17.23dJ5N02P3J

DEPARTMENT Communications & Performing Arts

DATE Sept. 19, 2014

Title of Course or Degree Change: MCB 4800 Advanced Television Studio Production

Change(s) Initiated: (Please check)

- |   |  |
|---|--|
| <input type="checkbox"/> Letter of Intent           | <input type="checkbox"/> Proposal  |
| <input type="checkbox"/> Closing of Degree Program  | <input type="checkbox"/> Proposal (Letter of Intent sent previously)                             |
| <input type="checkbox"/> New Course*                | <input type="checkbox"/> Change in Degree Requirements   |
| <input type="checkbox"/> New 82 Course              | <input type="checkbox"/> Change in Degree Requirements (adding concentration)                    |
| <input type="checkbox"/> New Certificate Program    | <input type="checkbox"/> Change in Discipline Code   |
| <input type="checkbox"/> Change in Pre/Co-Requisite | <input type="checkbox"/> Change in Description   |
| <input type="checkbox"/> Deletion of Course         | <input checked="" type="checkbox"/> Change in Course <u>Titles</u> , Numbers, Credits &/or Hours |
| <input type="checkbox"/> Other _____                |  |

PLEASE ATTACH PERTINENT MATERIAL TO ILLUSTRATE AND EXPLAIN ALL CHANGES

**I. DEPARTMENTAL ACTION**

Action by Department and/or Departmental Committee, if required:

Date approved 9/17/14 Signature, Committee Chairperson: \_\_\_\_\_

Signature, Department Chairperson: Gloria Nicosia

**II. PROVOST ACTION**

Provost to act within 30 days of receipt and forward to Collegewide Curriculum Committee exercising one of the following options:

- A. Approved  B. Returned to department with comments

Recommendations (if any): \_\_\_\_\_

Signature, Provost: \_\_\_\_\_ Date: \_\_\_\_\_

**III. CURRICULUM SUB-COMMITTEE RECOMMENDATIONS (\*FOR NEW COURSES ONLY):**

- A. Approved  B. Tabled  (no action to be taken by Curriculum Committee)

Recommendations (if any): \_\_\_\_\_

Signature, Sub-Committee Chair: \_\_\_\_\_ Date: \_\_\_\_\_

**IV. COLLEGE-WIDE CURRICULUM COMMITTEE ACTION**

Committee to act within 30 days of receipt, exercising one of the following options:

- A. Approved  (forwarded to Steering Committee)  
B. Tabled  (Department notified)  
C. Not Approved  (Department notified)

Signature, Chairperson of Curriculum Committee \_\_\_\_\_ Date: \_\_\_\_\_

Proposed title change:

FROM: MCB 4800 Advanced Video Production (3crs. 3 hrs.)

TO: MCB 4800 Advanced Television Studio Production (3 crs. 3 hrs.)

Rationale:

In the media arts field the phrase "video production," almost always refers to portable, remote techniques. The phrase "television studio" more accurately reflects the content of the course.