

KINGSBOROUGH COMMUNITY COLLEGE
The City University of New York

CURRICULUM DATA TRANSMITTAL SHEET

KCC PROUSEP197144410-32

DEPARTMENT Communications & Performing Arts

DATE Sept. 19, 2014

Title of Course or Degree Change: MCB 4100 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 Rocchia

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): _____

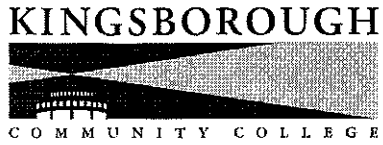
Signature, Sub-Committee Chair: _____ Date: _____

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: _____



Department of Communications & Performing Arts

Broadcasting | Film | Music | Speech | Theatre

Proposed title change:

From: MCB 4100 Introduction to Television Production (3 crs. 3 hrs.)

TO: MCB 4100 Television Studio Production (3 crs. 3hrs.)

Rationale:

Over the past decade, with the improvement in television cameras, more and more television production has been done outside of the traditional studio setting. Location film techniques are used for most drama shows, and the hours of sports and other outdoor activity production has soared. But the backbone of television production (news, talk shows, sit-coms, etc.) continues to use studio venues.

Since MCB 4100 deals only with the latter technique, we felt that it was important that the title of the course reflect that fact.