



COURSE SUBMISSION FORM

Revised Edition 11/9/16 JD

Office of the Registrar
1570 Baltimore Pike
Lincoln University, PA 19352
484-365-8087:Phone 484-365-8116:Fax

COURSE TITLE: Short (<= 20 Char.): <u>Computer Programming II</u>		<input type="radio"/> New Course <input checked="" type="radio"/> Course Revision
FULLTITLE (<= 35 Char.): <u>Computer Programming II</u>		
COURSE DESCRIPTION must be type written (For Catalog, 2-4 sentences): This course is a continuation of CSC-158. The students will use a structured programming language such as JAVA or C++ in problem solving. This course examines advanced features of modern programming languages such as object-oriented programming, string manipulation functions; and visual programming. Both procedural and event-driven programmings are covered. As a preparation for CSC 254, this course will also include an introduction to data structures such as queues and stacks.		Course Number: (xxx-000) Proposed: <u>CSC159</u> Existing: <u>CSC159</u>
		<input checked="" type="radio"/> Undergraduate <input type="radio"/> Graduate
		Credit Hours: <u>4</u> Class (Hr/Wk): <u>4</u> Lab (Hr/Wk): _____ Other (Hr/Wk): _____
Course is intended (Check all that apply): <input checked="" type="checkbox"/> Required for Majors: (list) <u>Computer Science</u> <input checked="" type="checkbox"/> Required for Minors: (list) <u>Computer Science</u> <input type="checkbox"/> Use in University Core Curriculum <input type="checkbox"/> Primarily as an Elective for Majors & Minors <input type="checkbox"/> Primarily as an Elective for Non-Majors <input type="checkbox"/> Can be taken by any Lincoln Student		Grading System <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Pass/Fail <input type="checkbox"/> Other: _____
Pre-Requisites <u>CSC158</u>		First term in which new revised course will be offered: <u>Fall 2017</u>
Co-Requisites		Expected Frequency: <input checked="" type="radio"/> Every Semester <input type="radio"/> Once per year <input type="radio"/> Once every ____ Sem.
		Probable Initial Instructor(s): <u>BS</u>
Approvals	Date	Signatures
Department	<u>4/19/2017</u>	Chair: <u>[Signature]</u>
School	<u>2-6-17</u>	Dean: <u>[Signature]</u>
Curriculum Committee		Chair: _____
Faculty		Verified by Registrar: _____

Refer to the Course Approvals Manual for complete instructions for the submission of proposals.