## UNIVERSITY OF KENTUCKY APPLICATION FOR NEW COURSE

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10.	What enrollment may be reasonably anticipated? 1-6			
11.	Will this course serve students in the Department primarily?	Yes	☐ No	
	Will it be of service to a significant number of students outside the Department? If so, explain.	☐ Yes	⊠ No	
	Will the course serve as a University Studies Program course?	Yes	⊠ No	
	If yes, under what Area?			
12.	Check the category most applicable to this course			
	relatively new, now being widely established			
	not yet to be found in many (or any) other universities			
13.	Is this course part of a proposed new program: If yes, which?	☐ Yes	⊠ No	
14.	Will adding this course change the degree requirements in one or more programs?* If yes, explain the change(s) below	☐ Yes	⊠ No	
15.	Attach a list of the major teaching objectives of the proposed course and outline and/or reference list	to be used.		
16.	If the course is a 100-200 level course, please submit evidence (e.g., correspondence) that the Commbeen consulted.	nunity College	System has	
17.	Within the Department, who should be contacted for further information about the proposed course?			
	Name Joel Lee, Dr.P.H. Phone Extension	323-5059 x	285	

\*NOTE: Approval of this course will constitute approval of the program change unless other program modifications are proposed.

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Signatures of Approval:	
Dean of the College	/0성/6    Date   3-/2-6ひ   Date
CURRICULUM Committe & Undergraduale Council	Date of Notice to the Faculty      >6   0 >  Date  3/1/02
Farming Plackwell  *Graduate Council  Phylip & Market Council  *Academic Council for the Medical Center	Date 9-22-03 Date 4/28/03
*Senate Council (Chair)  *If applicable, as provided by the Rules of the University Senate	Date  Date of Notice to University Senate
ACTION OTHER THAN APPROVAL	