

**UNIVERSITY OF KENTUCKY**  
**APPLICATION FOR CHANGE IN EXISTING COURSE: MAJOR & MINOR**

1. Submitted by College of Medicine Date 2/2/01  
Department/Division offering course School of Public Health
2. Changes proposed:  
(a) Present prefix & number SPH 810 Proposed prefix & number SPH 610  
(b) Present Title Injury Epidemiology and Control  
New Title SAME  
(c) If course title is changed and exceeds 24 characters (Including spaces), include a sensible title (not to exceed 24 characters) for use on transcripts:  
Injury Epi and Control  
(d) Present credits: 3 Proposed credits: SAME  
(e) Current lecture: laboratory ratio N/A Proposed: \_\_\_\_\_  
(f) Effective Date of Change: (Semester & Year) Fall 2003
3. To be Cross-listed as: \_\_\_\_\_  
Prefix and Number Signature: Department Chair
4. Proposed change in Bulletin description:  
(a) Present description (including prerequisite(s)):  
NO CHANGE  
\_\_\_\_\_  
\_\_\_\_\_  
(b) New description:  
NO CHANGE  
\_\_\_\_\_  
\_\_\_\_\_  
(c) Prerequisite(s) for course as changed: Change prerequisite from PM 521 to PM 620.
5. What has prompted this proposal?  
The MPH degree was originally submitted as a professional degree, however, the degree is now a Graduate School degree. The 600 number is needed to reflect this change. Refer to the cover letter for details.
6. If there are to be significant changes in the content or teaching objectives of this course, indicate changes:  
NO CHANGE  
\_\_\_\_\_  
\_\_\_\_\_
7. What other departments could be affected by the proposed change?  
N/A
8. Will changing this course change the degree requirements in one or more programs?\*  Yes  No  
**If yes, please attach an explanation of the change.\***
- 9.. Is this course currently included in the University Studies Program?  Yes  No  
**If yes, please attach correspondence indicating concurrence of the University Studies Committee.**
10. If the course is a 100-200 level course, please submit evidence (e.g., correspondence) that the Community College System has been consulted.

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

**UNIVERSITY OF KENTUCKY**  
**APPLICATION FOR CHANGE IN EXISTING COURSE: MAJOR & MINOR** PAGE 2 OF 2

11. Is this a minor change?  Yes  No  
 (NOTE: See the description on this form of what constitutes a minor change. Minor changes are sent directly from the Dean of the College to the Chair of the Senate Council. If the latter deems the change not to be minor, it will be sent to the appropriate Council for normal processing.)

12. Within the Department, who should be consulted for further information on the proposed course change?

Name: Joel Lee, Dr.P.H. Phone Extension: 323-5059 x285

**Signatures of Approval:**

Department Chair	Date
Dean of the College	Date
**Undergraduate Council	Date
**Graduate Council	Date
**Academic Council for the Medical Center	Date
**Senate Council	Date of Notice to University Senate

\*\*If applicable, as provided by the Rules of the University Senate.

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ACTION OTHER THAN APPROVAL

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The Minor Change route for courses is provided as a mechanism to make changes in existing courses and is limited to one or more of the following:

- a. change in number within the same hundred series;
- b. editorial change in description which does not imply change in content or emphasis;
- c. editorial change in title which does not imply change in content or emphasis;
- d. change in prerequisite which does not imply change in content or emphasis;
- e. cross-listing of courses under conditions set forth in item 3.0;
- f. correction of typographical errors. [University Senate Rules, Section III - 3.1]

APPLICATION FOR CHANGE IN EXISTING COURSE: MAJOR & MINOR PAGE 2 OF 2

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Name Joel Lee, Dr.P.H. Phone Extension: 323-5059 x285

Signatures of Approval:

[Signature] Department Chair

11/08/01

Date

[Signature] Dean of the College

3-12-02

Date

Date of Notice to the Faculty

1/25/02

Date

[Signature] Curriculum Committee Undergraduate Council

3/1/02

Date

[Signature] Faculty Council \*University Studies

9-22-03

Date

[Signature] \*Graduate Council

4/28/03

Date

[Signature] \*Academic Council for the Medical Center

\*Senate Council (Chair)

Date of Notice to University Senate

\*If applicable, as provided by the Rules of the University Senate

ACTION OTHER THAN APPROVAL

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