



UNIVERSITY OF KENTUCKY



College of Nursing
Office of the Dean
Chandler Medical Center
315 CON/HSLC Bldg.
Lexington, KY 40536-0232
(859) 323-6533
Fax: (859) 323-1057
www.mc.uky.edu/Nursing

MEMORANDUM

DATE: June 2, 2003

TO: Dr. James W. Holsinger, Jr.
Chair, Academic Council for the Medical Center

FROM: Dr. Carolyn A. Williams *CAW*
Dean, College of Nursing

SUBJECT: Application for new course

New Course:

The faculty of the College of Nursing have approved and submit for your approval a proposal for the following new course for the Doctor of Nursing Practice program:

NUR 981 - Independent Study in Nursing (3 Cr)

Course Description:

An elective course that provides students with an opportunity to explore a topic of interest under the direction of a faculty member. The end result should be negotiated between students and faculty and should yield a scholarly product. The minimum number of hours to be spent on the project and the means of evaluation will be decided before beginning the project. May be repeated to a maximum of 12 credits.

Pre-requisites:

Enrollment in Doctor of Nursing Practice program or consent of instructor

Effective Date:

Fall, 2003



UNIVERSITY OF KENTUCKY

Office of the Provost

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Lexington, KY 40506-0033

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www.uky.edu

JUL 28 2003

July 23, 2003

Jeffrey B. Dembo, D.D.S., Chair
University Senate Council
10 Administration Building
CAMPUS 0032

Dear Dr. Dembo:

At its meeting on July 22, 2003, the Academic Council for the Medical Center approved, and recommends approval by the Senate Council, for the proposal from the College of Nursing to add NUR 981, Independent Study in Nursing.

Thank you for your attention to this matter.

Sincerely,

David S. Watt, Ph.D.
Associate Provost for Academic Affairs

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attachments

c: Carolyn A. Williams, Ph.D.
Juliann G. Sebastian, Ph.D.
Angelique Clark
Jacque Hager

Rationale for new course:

The College needs an independent study course for the DNP program to provide DNP students with opportunities for in-depth learning experiences in unique areas of interest to individual students. This provides the opportunity to enrich and deepen their programs of study.



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TO: Deans, Department Chairs, Members of the University Senate

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Dean, College of Nursing

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APPLICATION FOR NEW COURSE

1 Submitted by College of Nursing Date June 2/03

Department/Division offering course College of Nursing

2. Proposed designation and Bulletin description of this course:

a Prefix and Number NUR 981 b. Title* Independent Study in Nursing

*NOTE: If the title is longer than 24 characters (including spaces), write a sensible title (not exceeding 24 characters) for use on transcripts Independent Study

c. Lecture/Discussion hours per week TBA d. Laboratory hours per week 0

e. Studio hours per week 0 f. Credits 1-3

g. Course description:

An elective course that provides students with an opportunity to explore a topic of interest under the direction of a faculty member. The end result should be negotiated between students and faculty and should yield a scholarly product. The minimum number of hours to be spent on the project and the means of evaluation will be decided before beginning the project. May be repeated to a maximum of 12 credits.

h. Prerequisites (if any):

Enrollment in Doctor of Nursing Practice program or consent of instructor

i. May be repeated to a maximum of 12 credits (if applicable)

4. To be cross-listed as

N/A
Prefix & No. Signature, Chairman, Cross-listing department

5. Effective Date Fall 2003 (semester and year)

6. Course to be offered X Fall X Spring X Summer

7. Will the course be offered each year? X Yes No

(Explain if not annually):

8. Why is this course needed?

The College needs an independent study course for the DNP program to provide DNP students with opportunities for in-depth learning experiences in unique areas of interest to individual students. This will enrich and deepen their programs of study.

9. a. By whom will the course be taught? DNP faculty

b. Are facilities for teaching the course now available? X Yes No

If not, what plans have been made for providing them?

10. What enrollment may be reasonably anticipated? 1-2 students per semester

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:

traditional; offered in corresponding departments elsewhere;

relatively new, now being widely established

not yet to be found in many (or any) other universities

13. Is this course applicable to the requirements for at least one degree or certificate at the University of Kentucky? Yes No

14. Is this course part of a proposed new program? Yes No
If yes, which?

15. Will adding this course change the degree requirements in one or more programs?* Yes No
If yes, explain the change(s) below:

This course will replace one of three (3 credit) cognates that had originally been planned for the program. Replacing one 3 credit cognate with this 3 credit course will not change the total number of credit hours required for the program.

16. Attach a list of the major teaching objectives of the proposed course and outline and/or reference list to be used.

NOTE: As this is an independent study course, the objectives will be negotiated between faculty and student.

17. If the course is a 100-200 level course, please submit evidence (e.g., correspondence) that the Community College System has been consulted.

18. Within the Department, who should be contacted for further information about the proposed course?
Name Juliann G. Sebastian, PhD, ARNP Phone Extension 323-6685

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

Signatures of Approval:

Juan Sebastian
Department Chair

Carolyn A. Williams
Dean of the College

6/2/03
Date

6/2/03
Date

*Undergraduate Council

*University Studies

[Signature]
*Graduate Council

*Academic Council for the Medical Center

*Senate Council (chair)

Date of Notice to the Faculty

Date

Date

Date

7.23.03
Date

Date of Notice to University Senate

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

ACTION OTHER THAN APPROVAL