APPLICATION FOR NEW COURSE

1.	Sub	omitted by the College of Arts and Sciences Date: 2.12.08						
	Dep	partment/Division proposing course: Judaic Studies						
2.	Proposed designation and Bulletin description of this course:							
•	a.	Prefix and Number HJS 326						
	b.	Title* The Jewish Experience in America						
	~.	*If title is longer than 24 characters, write a sensible title (24 characters or less) for use on transcripts:						
	c.	Courses must be described by <u>at least one</u> of the categories below. Include the number of <u>actual contact hours per week</u> for each category, as applicable.						
	() CLINICAL () COLLOQUIUM () DISCUSSION () LABORATORY () LECTURE) INDEPEND. STUDY () PRACTICUM () RECITATION () RESEARCH () RESIDENCY						
	() SEMINAR () STUDIO () OTHER – Please explain:						
	d.	Please choose a grading system: Letter (A, B, C, etc.) Pass/Fail						
	e. Number of credit hours: 3							
	f.	f. Is this course repeatable? YES NO If YES, maximum number of credit hours:						
	g. Course description:							
	An investigation of the history, literature, and situation of Jewish life in America							
	h.	Prerequisite(s), if any:						
	i.	Will this course be offered through Distance Learning? YES NO If YES, please circle one of the methods below that reflects how the majority of the course content will be delivered:						
		Internet/Web- Interactive Extended campus Kentucky Educational Television (KET/teleweb) Other						
		Please describe "Other":						
3.	Tea	aching method: N/A or Community-Based Experience Service Learning Component Both						
4.	То	be cross-listed as: Prefix and Number Signature of chair of cross-listing department						
5	Rec	mested effective date (term/year): Fall / 2008						

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Cou	rse to be offered (please check all that apply): 🛛 Fall 🔲 Spring 🔲 Summer					
Will	the course be offered every year?	\boxtimes	YES		NC	
If NO, please explain:						
Why is this course needed? There is student demand						
a.	By whom will the course be taught? _ Dr S Rosenbaum	-				
b.	Are facilities for teaching the course now available?	\boxtimes	YES	\Box .	NO	
	If NO, what plans have been made for providing them?					
Wha	at yearly enrollment may be reasonably anticipated?					
a.	Will this course serve students primarily within the department?		Yes	\boxtimes	No	
b.	Will it be of interest to a significant number of students outside the department?	\boxtimes	YES		NC	
	If YES, please explain.					
	Our courses attract students from across the University					
IfY			YES			
If Y †AS	Our courses attract students from across the University the course serve as a University Studies Program course [†] ? ES, under what Area?					
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If Y †AS Check	Our courses attract students from across the University the course serve as a University Studies Program course†? ES, under what Area? OF SPRING 2007, THERE IS A MORATORIUM ON APPROVAL OF NEW COURSES FOR ck the category most applicable to this course: traditional – offered in corresponding departments at universities elsewhere relatively new – now being widely established not yet to be found in many (or any) other universities	USP.	YES		NO No NO	
If Y †AS Chee Is th	Our courses attract students from across the University the course serve as a University Studies Program course [†] ? ES, under what Area? OF SPRING 2007, THERE IS A MORATORIUM ON APPROVAL OF NEW COURSES FOR ck the category most applicable to this course: traditional – offered in corresponding departments at universities elsewhere relatively new – now being widely established not yet to be found in many (or any) other universities is course applicable to the requirements for at least one degree or certificate at UK?	USP.	YES		NO	

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17.	The major teaching objectives of the pro-	oposed course, syllal	bus and/or reference list to be used are attached.	
18.	course is and graduate students b	y (i) requiring additi	at include a syllabus showing differentiation for unconal assignments by the graduate students; and/or the course for graduate students. (See SR 3.1.4)	
19.	Within the department, who should be contact	ted for further inform	nation about the proposed new course?	
Nam	: Oliver Leaman	Phone: <u>3-2272</u>	Email: oliver.leaman@uky.edu	
20.	Signatures to report approvals:	-10 b	, 0 Cm	e de la companya del companya de la companya del companya de la co
	2.12.08 DATE of Approval by Department Faculty	oliver leaman	Reported by Department Chair	signature
		·	/	
	DATE of Approval by College Faculty	printed name	Reported by College Dean	signature
	Approval UC 9/30/08		/	
	* DATE of Approval by Undergraduate Council	printed name	Reported by Undergraduate Council Chair	signature
			/	
	* DATE of Approval by Graduate Council	printed name	/ Reported by Graduate Council Chair	sígnature
			1	
	* DATE of Approval by Health Care Colleges Council (HCCC)	printed name	Reported by Health Care Colleges Council Chair	signature
	* DATE of Approval by Senate Council		Reported by Office of the Senate Council	
	* DATE of Approval by University Senate	Approximate fig. 40.40 Commission	Reported by Office of the Senate Council	

^{*}If applicable, as provided by the University Senate Rules. (http://www.uky.edu/USC/New/RulesandRegulationsMain.htm)