

REQUEST FOR COURSE CHANGE (MAJOR AND MINOR)

Complete 1a – 1f & 2a – 2c. Fill out the remainder of the form as applicable for items being changed.

1. General Information.					
a.	Submitted by the College of: <u>Agriculture</u>	Today's Date:	<u>10/12/09</u>		
b.	Department/Division: <u>Interdisciplinary Program</u>				
c.	Is there a change in "ownership" of the course?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>		
	If YES, what college/department will offer the course instead? _____				
d.	What type of change is being proposed?	<input checked="" type="checkbox"/> Major	<input type="checkbox"/> Minor ¹ (place cursor here for minor change definition)		
e.	Contact Person Name: <u>Dr. Mary Arthur</u>	Email: <u>marthur@uky.edu</u>	Phone: <u>257-2852</u>		
f.	Requested Effective Date:	<input type="checkbox"/> Semester Following Approval	OR	<input checked="" type="checkbox"/> Specific Term ² :	<u>Fall 2010</u>
2. Designation and Description of Proposed Course.					
a.	Current Prefix and Number: <u>NRC 320</u>	Proposed Prefix & Number:	<u>NRE 320</u>		
b.	Full Title: <u>Data Collection Techniques</u>	Proposed Title:	<u>Natural Resource and Environmental Analysis</u>		
c.	Current Transcript Title (if full title is more than 40 characters): _____				
c.	Proposed Transcript Title (if full title is more than 40 characters): _____				
d.	Current Cross-listing:	<input type="checkbox"/> N/A	OR	Currently ³ Cross-listed with (Prefix & Number):	_____
	Proposed – <input type="checkbox"/> ADD ³ Cross-listing (Prefix & Number): _____				
	Proposed – <input type="checkbox"/> REMOVE ^{3,4} Cross-listing (Prefix & Number): _____				
e.	Courses must be described by at least one of the meeting patterns below. Include number of actual contact hours⁵ for each meeting pattern type.				
Current:	<u>10</u> Lecture	<u>30</u> Laboratory ⁵	_____ Recitation	_____ Discussion	_____ Indep. Study
	_____ Clinical	_____ Colloquium	_____ Practicum	_____ Research	_____ Residency
	_____ Seminar	_____ Studio	_____ Other – Please explain: _____		
Proposed:	<u>10</u> Lecture	<u>30</u> Laboratory	_____ Recitation	_____ Discussion	_____ Indep. Study
	_____ Clinical	_____ Colloquium	_____ Practicum	_____ Research	_____ Residency
	_____ Seminar	_____ Studio	_____ Other – Please explain: _____		
f.	Current Grading System:	<input checked="" type="checkbox"/> Letter (A, B, C, etc.)	<input type="checkbox"/> Pass/Fail		
	Proposed Grading System:	<input checked="" type="checkbox"/> Letter (A, B, C, etc.)	<input type="checkbox"/> Pass/Fail		
g.	Current number of credit hours: <u>3</u>	Proposed number of credit hours: <u>3</u>			
h.	Currently, is this course repeatable for additional credit?				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

¹ See comment description regarding minor course change. *Minor changes are sent directly from dean's office to Senate Council Chair.* If Chair deems the change as "not minor," the form will be sent to appropriate academic Council for normal processing and contact person is informed.

² Courses are typically made effective for the semester following approval. No course will be made effective until all approvals are received.

³ Signature of the chair of the cross-listing department is required on the Signature Routing Log.

⁴ Removing a cross-listing does not drop the other course – it merely unlinks the two courses.

⁵ Generally, undergrad courses are developed such that one semester hr of credit represents 1 hr of classroom meeting per wk for a semester, exclusive of any lab meeting. Lab meeting generally represents at least two hrs per wk for a semester for 1 credit hour. (See SR 5.2.1.)

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Proposed to be repeatable for additional credit?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
If YES:	Maximum number of credit hours: _____		
If YES:	Will this course allow multiple registrations during the same semester?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
i. Current Course Description for Bulletin:	<p><u>A field-oriented course taught off campus as a three-week summer camp in August. Emphasis is placed on methodologies for field data collection necessary to evaluate a variety of natural resources on forest, agricultural, and surface mined lands. Students will become familiar with sampling instrumentation, collection, preservation, analysis and data interpretation. Lecture, 10 hours; laboratory, 30 hours per week (Monday-Friday) for three weeks.</u></p>		
Proposed Course Description for Bulletin:	<u>same</u>		
j. Current Prerequisites, if any:	<u>BIO 150/152 and CHE 105</u>		
Proposed Prerequisites, if any:	<u>same</u>		
k. Current Distance Learning(DL) Status:	<input checked="" type="checkbox"/> N/A <input type="checkbox"/> Already approved for DL* <input type="checkbox"/> Please Add ⁶ <input type="checkbox"/> Please Drop		
*If already approved for DL, the Distance Learning Form must also be submitted <u>unless</u> the department affirms (by checking this box <input type="checkbox"/>) that the proposed changes do not affect DL delivery.			
l. Current Supplementary Teaching Component, if any:	<input type="checkbox"/> Community-Based Experience <input type="checkbox"/> Service Learning <input type="checkbox"/> Both		
Proposed Supplementary Teaching Component:	<input type="checkbox"/> Community-Based Experience <input type="checkbox"/> Service Learning <input type="checkbox"/> Both		
3. Currently, is this course taught off campus?	YES <input type="checkbox"/>		NO <input checked="" type="checkbox"/>
Proposed to be taught off campus?	YES <input type="checkbox"/>		NO <input checked="" type="checkbox"/>
4. Are significant changes in content/teaching objectives of the course being proposed?	YES <input type="checkbox"/>		NO <input checked="" type="checkbox"/>
If YES, explain and offer brief rationale:			

5. Course Relationship to Program(s).			
a. Are there other depts and/or pgms that could be affected by the proposed change?	YES <input type="checkbox"/>		NO <input checked="" type="checkbox"/>
If YES, identify the depts. and/or pgms: _____			
b. Will modifying this course result in a new requirement⁷ for ANY program?	YES <input type="checkbox"/>		NO <input checked="" type="checkbox"/>
If YES ⁷ , list the program(s) here: _____			
6. Information to be Placed on Syllabus.			
a.	<input type="checkbox"/>	Check box if <u>changed to 400G or 500.</u>	If <u>changed to 400G-</u> or 500-level course you must send in a syllabus and <i>you must include the differentiation</i> between undergraduate and graduate students by: (i) requiring additional assignments by the graduate students; and/or (ii) establishing different grading criteria in the course for graduate students. (See SR 3.1.4.)

⁶ You must *also* submit the Distance Learning Form in order for the course to be considered for DL delivery.

⁷ In order to change a program, a program change form must also be submitted.

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Signature Routing Log

General Information:

Course Prefix and Number: NRC prefix to NRE prefix

Proposal Contact Person Name: Dr. Mary Arthur Phone: 257-2852 Email: marthur@uky.edu

INSTRUCTIONS:

Identify the groups or individuals reviewing the proposal; note the date of approval; offer a contact person for each entry; and obtain signature of person authorized to report approval.

Internal College Approvals and Course Cross-listing Approvals:

Reviewing Group	Date Approved	Contact Person (name/phone/email)	Signature
Natural Resource Conservation and Management Steering Committee	10.12.09	Mary Arthur / 257-2852 / marthur@uky.edu	<i>Mary Arthur</i>
Undergraduate Carr. Comm. COA	10-16-09	Larry Graben 17-1888 <i>lgraben@uky.edu</i>	<i>Larry Graben</i>
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External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ^a
Undergraduate Council	1-19-2010	<i>[Signature]</i>	
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

^a Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.