

DROP COURSE FORM

| | |
|--|--|
| 1. General Information. | |
| a. Submitted by the College of: | <u>The Graduate School</u> Today's Date: <u>December 2, 2011</u> |
| b. Department/Division: | <u>The Martin School of Public Policy and Administration</u> |
| c. Contact Person Name: | <u>William Hoyt</u> Email: <u>whoyt@uky.edu</u> Phone: <u>257-2518</u> |
| 2. Course Information. | |
| a. Course Prefix and Number: | <u>PA 641</u> |
| b. Course Title: | <u>POLITICAL ENVIRONMENT OF PUBLIC ORGANIZATIONS</u> |
| c. Credit Hours: | <u>3</u> |
| 3. Effective Date ¹ of Drop: | <input checked="" type="checkbox"/> Semester Following Approval OR <input type="checkbox"/> Specific Term ² : _____ |
| 4. Is this course cross-listed? | YES ³ <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| If YES ³ , what is the cross-listed course prefix and number? _____ | |
| If YES ³ , should the cross-listed course(s) also be dropped ³ ? YES ³ <input type="checkbox"/> NO <input type="checkbox"/> | |
| Explain, if necessary: _____ | |
| 5. Why is the course being dropped? | <u>Course has not been a required part of the MPA curriculum since 2004.</u> |
| 6. Will dropping this course change the requirements ⁴ for any program? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| If YES ⁴ , list the program(s) here: _____ | |
| 7. Has the course been taken by a significant number of students in other colleges/depts? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| If YES, list the colleges/departments: _____ | |
| If YES, what provision has been made for meeting the needs of these students? _____ | |
| 8. Is this course currently included in the University Studies Program? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |

¹ The effective date for a dropped course is *the first term when the course is not available*, NOT the last term the course is offered.

² Effective dates are typically 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 In order to change a program, a program change form must also be submitted.

DROP COURSE FORM

Signature Routing Log

General Information:


Course to be Dropped (prefix and number): PA 641

Proposal Contact Person Name: Sarah Lee Phone: 7-5594 Email: solee@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 |
|-----------------------|---------------|---------------------------------------|---|
| Martin School Faculty | 12/1/11 | William Hoyt / 7-2518 / whoyt@uky.edu |  |
| | | / / | |
| | | / / | |
| | | / / | |
| | | / / | |

External-to-College Approvals:

| Council | Date Approved | Signature | Approval of Revision ⁵ |
|------------------------------|---------------|----------------------------|-----------------------------------|
| Undergraduate Council | | | |
| Graduate Council | | | |
| Health Care Colleges Council | | | |
| Senate Council Approval | | University Senate Approval | |

Comments:

⁵ Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.