REQUEST TO DROP A COURSE

1.	General Information.		
a.	Submitted by the College of:	Fine Arts	Today's Date: 10-13-09
b.	Department/Division:	Department of Art	
c.	Contact Person Name: Rae Goodwin	Email: rae.goodwin@uky.edu	Phone: 859-455-6461

2.	Course Information.
a.	Course Prefix and Number: A-S 215
b.	Course Title: Studio II
c.	Credit Hours: 3

3.	Effective Date[1] of Drop: ☐ Semester Following Approval OR ☒ Specific Term[2]: Fall 2010

4.	Is this course cross-listed?	YES[3] ☐	NO ☒
	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] ☐	NO ☐
	Explain, if necessary:	———	

5.	Why is the course being dropped?	With this proposed program change in Foundations, this course will no longer be required for the department. The course content will be integrated into three other courses: A-S 102, A-S 103 and A-S 130.

6.	Will dropping this course change the requirements[4] for any program?	YES ☒	NO ☐
	If YES[4], list the program(s) here:	Art Studio, Arts Administration and Art Education	

7.	Has the course been taken by a significant number of students in other colleges/depts?	YES ☐	NO ☒
	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 ☐	NO ☒

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[1] The effective date for a dropped course is **the first term when the course is not available**, <u>NOT</u> 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.
   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.

REQUEST TO DROP A COURSE

Signature Routing Log

General Information:

Course to be Dropped (prefix and number):   A-S 215

Proposal Contact Person Name: Rae Goodwin   Phone: 455-6461   Email: rae.goodwin@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
Department of Art	12/08/2009	Ben Withers /7-403/ bwithers@uky.edu	Ben Withers
College of Fine Arts	12/14/09	R Sutter / /	Ret S
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		/ /	
		/ /	

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision[5]
Undergraduate Council	3/2/2010		
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

The Art Studio and Art Education Program Change Requests are a part of this package. Arts Administration will submit their Request for a Program Change at a later date.

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