UNIVERSITY SENATE ROUTING LOG

Proposal Title: Drop ANT 607

Name/email/phone for proposal contact: Richard W. Jefferies / rwjeff1@uky.edu / 257-2860

Instruction: To facilitate the processing of this proposal please identify the groups or individuals reviewing the proposal, identify a contact person for each entry, provide the consequences of the review (specifically, approval, rejection, no decision and vote outcome, if any) and please attach a copy of any report or memorandum developed with comments on this proposal.

Reviewed by: (Chairs, Directors, Faculty Groups, Faculty Councils, Committees, etc)	Contact person Name (phone/email)	Consequences of Review:	Date of Proposal Review	Review Summary Attached? (yes or no)
Curriculum Committee, Chair, Faculty	Richard Jefferies, rwjeff1@uky.edu, 257.2860	Approved	11-16-07	No

UNIVERSITY OF KENTUCKY APPLICATION TO DROP A COURSE

1.	Subm	nitted by College	e of	Arts and S	ciences		Da	ate _	12/10/07	
		, ,	-							
	Depa	artment/Division	offeri	ng course	Anthro	pology				
2.	Prefix	x and Number	ANT	607		Title	Food Related Behaviors (Same as NFS/NS/BSC 607)		Credits	3
3.	Effec	ctive Date Au	igust 1	5, 2008			(semester & year	ar)	Fall 2008	
4.	Why	is the course to	be dro	opped?						
	No fa	aculty available	to tead	ch course.						
5.							ents in one or more programs? 'a program change must be submitted.)		☐ Yes	⊠ No
6.							students in other departments/colleges?		⊠ Yes	☐ No
	a.						which student enrollment in this course h			
	b.						and Food Science, Behavioral Sciences,	Nutriti	onal Sciences	
	о.		cross-	listed as N			needs of these students? and BSC 607. Students in those program	ns may	continue takin	g this
7.	If so,	is course in curre, please submit eulted.					Colleges? at the Community College System has be	een	☐ Yes	⊠ No
8.	Is thi	is course current	ly incl	luded in the	Univers	ity Stud	lies Program?		☐ Yes	⊠ No
9.	With	in the Departme	ent, wh	o should be	e contacto	ed for fi	urther information about this proposal?			
		Richard W. Je	fferies		T			257-2		
				1	Vame				Phone Extens	ion

UNIVERSITY OF KENTUCKY APPLICATION TO DROP A COURSE

Signatures of Approval:

November 16, 2007 Date of Approval by Department Faculty	(pifort			
Date of Approval by Department Faculty	Reported by Department Chair			
Date of Approval by College Faculty	Reported by College Dean			
*Date of Approval by Undergraduate Council	Reported by Undergraduate Council Chair			
	_			
*Date of Approval by Graduate Council	Reported by Graduate Council Chair			
*Date of Approval by Health Care Colleges Council (HCCC)	Reported by HCCC Chair			
*Date of Approval by Senate Council	Reported by Senate Council Office			
*Date of Approval by University Senate	Reported by Senate Council Office			

Rev 07/06

^{*}If applicable, as provided by the Rules of the University Senate.