

## **Drop Course Report**

5/8/2014 7:40:31 AM

RECEIVED

**Course Information** 

1a. Prefix and Number: ARC - Architecture , ARC 324 HISTORY &THEORY-ARC IV

1b. Course Title: HISTORY &THEORY-ARC IV

1c. Credit Hours: 3.0

1d. Submitted by the College of: College of Design

Date Submitted: 1/29/2014

1e. Department/Division: School of Architecture

Contact Person

Name: David Biagi

Email: dbiagi@uky.edu

Phone: 257-7617

Responsible Faculty ID (if different from Contact)

Name:

Email:

Phone:

Effective Date of Drop: Semester Following Approval OR:

## **Cross Listing:**

Cross-listed course prefix and number: none

Should the cross-listed course(s) also be dropped?: No

Explain, if necessary:

Why is this course being dropped?: House-cleaning related course drop due to previous program changes to curriculum in 2011. This course is no longer offered in the current program.

Will dropping this course change the requirements for any program?: No

If Yes, list the program(s) here:

Has the course been taken by a significant number of students in other colleges/depts?: No

If YES, list the colleges/departments:

If YES, what provision has been made for meeting the needs of these students?:

Is this course currently included in the University Studies Program?: No

Instructor Name:

MAY 7 2014

OFFICE OF THE SENATE COUNCIL



## **Drop Course Report**

SIGNATURE|DBIAGI|David M Biagi|ARC 324 DROP Dept Review|20140207

SIGNATURE|HDSAWD|A Whiteside-Dickson|ARC 324 DROP College Review|20140210

SIGNATURE|JMETT2|Joanie Ett-Mims|ARC 324 DROP Undergrad Council Review|20140507

Courses	Request Tracking
2001303	Acquest Tracking

## **Drop Course Form**

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a.* Course Prefix and Number:						
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ARC 324 HISTORY & THEOR	RY-ARC IV	[ <b>x</b> ]				
<u> </u>						
<ul> <li>b. Course Title;</li> <li>c. Credit Hours;</li> </ul>	HISTORY & THEC	RY-ARC IV		1		
d.* Submitted by the College of:	College of Design		Submi	ssion Date: 1/29/2	2014	
e.* Department/Division:	School of Architect	ture	: 			
• f.	David Direct	Fac. 9: 0 *	· Ouder ode · · · · · ·	Phono: 257 7047		
* Contact Person Name:  * Responsible Faculty ID (if	David Biagi	Email: dbiagi		Phone: 257-7617		
different from Contact)	1.	Email:		Phone:	1	
Effective Date <sup>1</sup> of Drop:*		oval OR O Specific 1	Term Select			<u> </u>
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cross-listing cross-listed course prefix and number chould the cross-listed course(s) also explain, if necessary:  Why is this course being dropped? Course-cleaning related course	none be dropped <sup>3</sup> ?	Yes No		iculum in 2011.		
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Cross-listing Cross-listed course prefix and number Should the cross-listed course(s) also explain, if necessary:  Why is this course being dropped? House-cleaning related course This course is no longer offer.	he dropped <sup>3</sup> ?	Yes No	changes to curr	iculum in 2011.		
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If YES, list the colleges/departments:								
If YES, what provision has been made for meeting the needs of these students?								
Is this course currently included in the UK Core Program?* ⊖Yes ◎ No								
<sup>1</sup> The effective data for a dropped course is the first term when the course is not ava <sup>2</sup> Effective dates are typically the semester following approval. No course will be made of 3 Signature of the chair of the cross-listing department is required on the Signature Rou <sup>4</sup> In order to change a program, a program change form must also be submitted.	effective until all approvals are received.							