

RECEIVED

2/11/2014 8(29:01 AM

## Course Information

1a. Prefix and Number: ARC - Architecture, ARC 821 STDY IN HIS &THRY OF ARC II:URBAN FORM FEB 10 2014

1b. Course Title: STDY IN HIS &THRY OF ARC II:URBAN FORM

OFFICE OF THE SENATE COUNCIL

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:



# **Drop Course Report**

SIGNATURE|DBIAGI|David M Biagi|ARC 821 DROP Dept Review|20140207
SIGNATURE|HDSAWD|A Whiteside-Dickson|ARC 821 DROP College Review|20140210

Courses Request Tracking

# **Drop Course Form**

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Attachments:	_	
Browse	Upload File	
elect saved project to retrieve	Get New	
	(* depotes required fields)	
0 14 6	(* denotes required fields)	
Course Information.  • a.* Course Prefix and Number:	:	
ARC - Architecture	<u></u>	
	HRY OF ARC II:URBAN FORM ▼	
b. Course Title:	STDY IN HIS & THRY OF ARC IL:URBAN FORM	
c. Credit Hours;  d * Submitted by the College	3.0	
<ul> <li>d.* Submitted by the College o</li> <li>e.* Department/Division:</li> </ul>	College of Design Submission Date: 1/29/2014	
• f.	School of Architecture	
* Contact Person Name:	David Biagi Email: dbiagi@uky.edu Phone: 257-7617	
* Responsible Faculty ID (if different from Contact)	Email: Phone:	
	•	
	ster Following Approval OR © Specific Term Select	
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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.	o be dropped <sup>3</sup> ? Yes No   **  **  **  **  **  **  **  **  **	
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	pr none  pr	
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	o be dropped <sup>3</sup> ? Yes No   **  **  **  **  **  **  **  **  **	

If YES, list the colleges/departments:		•
If YES, what provision has been made for meeting the needs of	these students?	
	*.	
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Is this course currently included in the UK Core Program?*	∵ Yes ® No	÷
The effective data for a dropped course is the first term when to	the course is not available MOT the last term the course	e offered

Submit as New Proposal Save Current Changes

<sup>2</sup> Effective date for a dispersion set in the first term when the course is not available, NOT the last term the course is of 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.