UNDERGRADUATE EDUCATION

## UNIVERSITY OF KENTUCKY REQUEST FOR CHANGE IN UNDERGRADUATE PROGRAMS AN II: 01

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	Total Hours:	
Rationale for Change(s): (If rationale involves accreditation requirements.)	quirements, please include	e specific references to those
UNIVERSITY	OF KENTUCK	Ŷ
REQUEST FOR CHANGE IN	UNDERGRADI	JATE PROGRAM
. List below the typical semester by semester program for a majo	r.	
Current		Proposed
		Yes: ⊠ No: □
Will this program be printed in the Bulletin?		100. 24 - 200 - 2
Signatures of Approval:	·	
Department Chair		Date
Kay Haff Dean of the College		1/23/66 Date
		Date of Notice to the Faculty
UNDERGRADUATE COUNCIL		Traich 28, 2
*Undergraduate Council		Date

	Date
*University Studies	·
*Graduate Council	Date
	Date
*Academic Council for the Medical Center	
*Senate Council	Date of Notice to Univ. Senate
If applicable, as provided by the Rules of the University Senate	
ACTION OTHER THAN APPROV	AI.
ACTION OTHER THAN ACTION	121

Rev 11/98