

DROP COURSE FORM

1. General Information.	
a. Submitted by the College of: <u>Engineering</u>	Today's Date: <u>12-2-2010</u>
b. Department/Division: <u>Civil Engineering</u>	
c. Contact Person Name: <u>Tim Taylor</u>	Email: <u>taylor@engr.uky.edu</u> Phone: <u>859-323-3680</u>
2. Course Information.	
a. Course Prefix and Number: <u>CE-505</u>	
b. Course Title: <u>Construction Project Planning and Management</u>	
c. Credit Hours: <u>3</u>	
3. Effective Date¹ of Drop: <input checked="" type="checkbox"/> Semester Following Approval OR <input type="checkbox"/> Specific Term ² : _____	
4. Is this course cross-listed? YES ³ <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
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 <input type="checkbox"/> NO <input type="checkbox"/>	
Explain, if necessary: _____	
5. Why is the course being dropped?	<u>The content offered in this course is being incorporated into a new proposed course, CE-509 Control of the Construction Project. The 509 course will present an integrated approach to project cost, scheduling, and control which is a common for teaching this content in other civil engineering programs. The 505 course is being dropped because it would present significant content overlap with the new proposed 509 course.</u>
6. Will dropping this course change the requirements⁴ for any program? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
If YES ⁴ , list the program(s) here: _____	
7. Has the course been taken by a significant number of students in other colleges/depts? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>	

¹ The effective date for a dropped course is ***the first term when the course is not available***, NOT 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.

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.

DROP COURSE FORM

Signature Routing Log

General Information:



Course to be Dropped (prefix and number): CE-505

Proposal Contact Person Name: Tim Taylor Phone: 3-3680 Email: taylor@engr.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
CE Eduaction team	2/9/11	Nick Stamatiadis / 7-8012 / nstamat@engr.uky.edu	
CE Faculty	2/25/11	George Blandford / 7-1855 / gebland@engr.uky.edu	
<i>Engineering faculty</i>	<i>4/11/11</i>	<i>Richard Swergard / 7827 / rswergar@engr.uky.edu</i>	<i>Richard Swergard</i>
		/ /	
		/ /	

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ⁵
Undergraduate Council	10/11/2011	Sharon Gill	
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

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