

**UNIVERSITY OF KENTUCKY  
APPLICATION TO DROP A COURSE**

1. Submitted by College of HEALTH SCIENCES Date 2/20/2006

Department/Division offering course Dept of Clinical Sciences; Division of Health Sciences Education and Research

2. Prefix and Number CLM 353 Title Health Administration, Planning, and Management Techniques Credits 3

3. Effective Date Fall 2006 (semester & year)

4. Why is the course to be dropped?

**1. Essentials of strategic planning can be adequately covered in CLM 452: Community and Institutional Planning for Health Services Delivery**

**2. Essentials of health administration and management techniques can be adequately covered in CLM 351: Health Services Administration and CLM 444: Leadership and Human Resource Management**

**3. Dropping CLM 353 will provide an opportunity to add a new core course with important, relevant, and current content, i.e., CLM 350: Health Policy and Politics**

5. Will dropping this course change the degree requirements in one or more programs? **Yes**  
If yes, explain the change(s) below

**The core course CLM 353: Health Administration, Planning, and Management Techniques will be replaced by a new core course, CLM 350: Health Policy and Politics**

6. Has the course been taken by a significant number of students in other departments/colleges? **No**

a. If yes, list the college(s) or department(s) from which student enrollment in this course has come, if known.

b. What provision has been made for meeting the needs of these students?

7. Is this course in current use in any of the Community Colleges? **No**  
If so, please submit evidence (e.g., correspondence) that the Community College System has been consulted.

8. Is this course currently included in the University Studies Program? **No**

9. Within the Department, who should be contacted for further information about this proposal?

Elizabeth D Schulman, PhD, Assoc Professor

Name

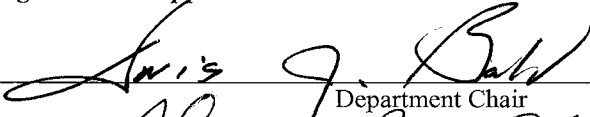
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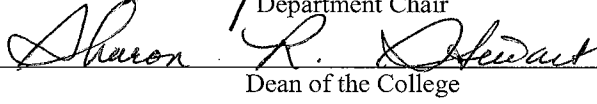
\*NOTE: Approval to drop the course will constitute approval of the program change unless additional modifications are proposed.

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Signatures of Approval:

  
Department Chair

22 May 2006  
Date

  
Dean of the College

3-26-06  
Date

Date of Notice to the Faculty

\*Undergraduate Council

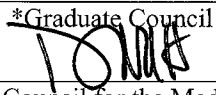
Date

\*University Studies

Date

\*Graduate Council

Date

  
Academic Council for the Medical Center

4.19.06

Date

Senate Council

Date of Notice to University Senate

\*If applicable, as provided by the Rules of the University Senate

ACTION OTHER THAN APPROVAL