UNIVERSITY OF KENTUCKY
APPLICATION TO DROP A COURSE

1. Submitted by College of   Engineering   Date   April 8, 2009

    Department/Division offering course   Computer Science

2. Prefix and Number   CS 485   Title   Topics in Computer Science   Credits   2-4

3. Effective Date   immediate   (semester & year)

4. Why is the course to be dropped?

    The course CS 485 is an erroneous form of CS 485G that is listed in the UK Bulletin.
    (http://www.uky.edu/Registrar/bulletinCurrent/courses/CS.pdf)

    CS 485 is listed in addition to the correct CS 485G in the IRIS system, which leads to confusion during registration.

    The CS department never applied for CS 485; it successfully applied for CS 485G.

5. Will dropping this course change the degree requirements in one or more programs?   ☐ Yes   **X** No
    If yes, explain the change(s) below. (NOTE – If "yes," a program change must be submitted.)

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

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

    Jerzy W. Jaromczyk, DUS <jurek@cs.uky.edu>   7-1186
    _____Name_____   Phone Extension

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Signatures of Approval:

FEBRUARY 20, 2009   (unanimous decision)
_____
Date of Approval by Department Faculty

_____
Reported by Department Chair

11-20-09
_____
Date of Approval by College Faculty

_____
Reported by College Dean

1-19-2010
_____
*Date of Approval by Undergraduate Council

_____
Reported by Undergraduate Council Chair

_____
*Date of Approval by Graduate Council

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Reported by Graduate Council Chair

_____
*Date of Approval by Health Care Colleges Council (HCCC)

_____
Reported by HCCC Chair

_____
*Date of Approval by Senate Council

_____
Reported by Senate Council Office

_____
*Date of Approval by University Senate

_____
Reported by Senate Council Office

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

Rev 07/06

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UNIVERSITY SENATE ROUTING LOG

Proposal Title: Door CS485

Name/email/phone for proposal contact: JERzy W. JAROMCZYK, DUS
jurek@cs.uky.edu

Instruction: To facilitate the processing of this proposal please identify the groups or individuals reviewing the proposal, identify a contact person for each entry, provide the consequences of the review (specifically, approval, rejection, no decision and vote outcome, if any) and please attach a copy of any report or memorandum developed with comments on this proposal.

Reviewed by: (Chairs, Directors, Faculty Groups, Faculty Councils, Committees, etc)	Contact person Name (phone/email)	Consequences of Review:	Date of Proposal Review	Review Summary Attached? (yes or no)
CS Department	Jerzy Jaromczyk, DUS jurek@cs.uky.edu	Approval	20 Feb 2009	NO
College of Engineering Undergrad Educ Team	Rick Swergard swergar@engr.uky.edu	Approved	10/7/09	No
Faculty	" "	Approved	11-02-09	no

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