UNIVERSITY OF KENTUCKY
APPLICATION TO DROP A COURSE

1.   Submitted by College of _____ Date _____

       Department/Division offering course _____

2.   Prefix and Number _____ Title _____ Credits _____

3.   Effective Date _____ (semester & year)

4.   Why is the course to be dropped?

       _____

       _____

       _____

5.   Will dropping this course change the degree requirements in one or more programs?   ☐ Yes   ☐ 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   ☐ 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   ☐ 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   ☐ No

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

       _____   _____
                     Name   Phone Extension

UNIVERSITY OF KENTUCKY
APPLICATION TO DROP A COURSE

Signatures of Approval:

May 10, 2007

_____
Date of Approval by Department Faculty

_____
Reported by Department Chair

August 20, 2007

_____
Date of Approval by College Faculty

_____
Reported by College Dean
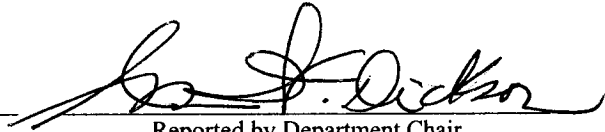
_____
*Date of Approval by Undergraduate Council

_____
Reported by Undergraduate Council Chair

_____
*Date of Approval by Graduate Council

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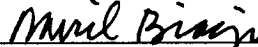
_____
*Date of Approval by Health Care Colleges Council (HCCC)

_____
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