## UNIVERSITY OF KENTUCKY APPLICATION FOR CHANGE IN EXISTING COURSE: MAJOR & MINOR

1.	Submitted by College of			Date					
	Dep	artment/Division offering course							
2.		nges proposed:	Proposed p						
	(b)								
	New Title								
	(c) If course title is changed and exceeds 24 characters (Including spaces), include a sensible title (not to exceed 24 characters) for use on transcripts:								
	(d)	Present credits:		Proposed credits:	_ 				
	(e)	Current lecture: laboratory ratio	I	Proposed:					
	(f)	Effective Date of Change: (Semes	ster & Year)		_				
3.	To b	pe Cross-listed as:							
4.	(a) Present description (including prerequisite(s):								
	(b) New description:								
	(c)	Prerequisite(s) for course as change	ged:						
5.	What has prompted this proposal?								
6.	If there are to be significant changes in the content or teaching objectives of this course, indicate changes:								
7.	What other departments could be affected by the proposed change?								
8.	Is this course applicable to the requirements for at least one degree or certificate at the University of Kentucky?				□ No				
9.	Will changing this course change the degree requirements in one or more programs?  If yes, please attach an explanation of the change. (NOTE – If "yes," program change form must also be submitted.)					□ No			
10.		Is this course currently included in the University Studies Program?  Yes No. 15 Yes, please attach correspondence indicating concurrence of the University Studies Committee.			☐ No				

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	students in assignments, grading criteria, and grading scales. Che	t showing differentiation for undergraduate and graduate eck here if 400G-500.
12.	Is this a minor change? (NOTE: See the description on this form of what constitutes a minor change to the Chair of the Senate Council. If the latter deems the council for normal processing.)	Yes No nange. Minor changes are sent directly from the Dean of hange not to be minor, it will be sent to the appropriate
13.	Within the Department, who should be consulted for further information	n on the proposed course change?
	Name: Allison CarillW hite, DGS	Phone Extension: 7-7763
Signa	atures of Approval:	1 200.
	May 10,2007	100 H
	Date of Approval by Department Faculty	Reported by Department Chair
	August20,2007	A . 7 B :
	Date of Approval by College Faculty	Reported by Codege 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 ap	plicable, as provided by the Rules of the University Senate.	
	13.5	
	*******	
The M the fol	linor Change route for courses is provided as a mechanism to make chang llowing:	es in existing courses and is limited to one or more of
	<ul> <li>a. change in number within the same hundred series;</li> <li>b. editorial change in description which does not imply change in content of change in title which does not imply change in content or change in prerequisite which does not imply change in content or</li> </ul>	or emphasis:

cross-listing of courses under conditions set forth in item 3.0;

Rev 7/06

correction of typographical errors. [University Senate Rules, Section III - 3.1]