SIGNATURE ROUTING LOG

General Information:

| Proposal Type: | Course 🛚 | Program | Othe | er 🗌 | 0.000 |
|-----------------|----------------|-------------------|-----------------------------------|------------------|-----------|
| 10.0 | | number, pgm major | & degree, etc.): | FR 412 | DROP |
| Proposal Contac | t Person Name: | Jeffrey Peters | Phone: <u>269-</u> <u>1733</u> | Email: <u>jn</u> | p@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 |
|--|------------------|--|----------------|
| MCL French and Italian division faculty | 9/15/09 | Suzanne Pucci / 257-1066 / spucc1@uky.edu | Sugarne Pucc |
| MCL, Chair | 9/15/09 | Ted Fiedler / 257- / tfiedler@uky.edu | Theodore field |
| | | 1 1 | |
| A&S Educational Policy Committee | 3/31/10 | David Hunter / 257-7016 / david.hunter@uky.edu | Whenter # |
| A&S Associate Dean for Undergraduate Programs | 3/31/10 | Anna Bosch / 257-6689 / bosch@uky.edu | -ARUBOSIN |

External-to-College Approvals:

| Council | Date Approved | Signature | Approval of Revision ² |
|------------------------------|------------------|----------------------------|-----------------------------------|
| Undergraduate Council | 9/28/2010 | , | |
| Graduate Council | | | |
| Health Care Colleges Council | | | |
| Senate Council Approval | | University Senate Approval | |

| Comments: | |
|-----------|--|
| | |

¹ Proposal name used here must match name entered on corresponding course or program form.

² Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.

REQUEST TO DROP A COURSE

| 1. | General Information. | | |
|----|--|-------------------|------|
| a. | Submitted by the College of: $\underline{A\&S}$ Today's Date: $\underline{9}$ - | <u>15-09</u> | |
| b. | Department/Division: MCLLC/French | | |
| c. | Contact Person Name: <u>Dr. Jeffrey Peters</u> Email: <u>jnp@uky.edu</u> Phor | ne: <u>269-17</u> | 33 |
| 2. | Course Information. | | |
| a. | Course Prefix and Number: FR 412 | | |
| b. | Course Title: <u>Elementary French Conversation and Composition</u> | | |
| c. | Credit Hours: <u>3</u> | | |
| 3. | Effective Date ¹ of Drop: Semester Following Approval OR Specific Term ² : | upon appro | |
| 4. | Is this course cross-listed? | YES ³ | № 🖂 |
| | 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 | NO 🗌 |
| | Explain, if necessary: | | |
| 5. | Why is the course being dropped? Not needed in new, revised major | | |
| 6. | Will dropping this course change the requirements ⁴ for any program? | YES 🔀 | NO 🗌 |
| | If YES ⁴ , list the program(s) here: <u>Major in French; Minor in French</u> | | |
| 7. | Has the course been taken by a significant number of students in other colleges/depts? | YES [| NO 🖂 |
| | 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 🗌 | NO 🛚 |

The effective date for a dropped course is *the first term when the course is not available*, <u>NOT</u> the last term the course is offered.

Figure 1 The effective dates are typically the semester following approval. No course will be made effective until all approvals are received.

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.