APPLICATION FOR CHANGE IN EXISTING COURSE: MAJOR and MINOR

1.	Submitted by the College of	Arts and Sciences	Date:	November 1, 2007
	Department/Division offering co	ourse: Geogrpahy		
2.	What type of change is being pro *See the description at the end of of the college to the Chair of the	f this form regarding what constitut	Minor change. Minor	changes are sent directly from the dean
	If the Senate Council chair deem and an email notification will be		orm will be sent to the app	propriate Council for normal processing
		PROPOSED C		and the same of th
	Fill out the ".	Proposed' field only for items bein	ng changed. Enter N/A if	not changing.
	Cir	cle the number for each item(s) be	ing changed. For example	:6.
3.)	Current prefix & number:	GEO 480	Proposed prefix & numb	er: <u>GEO 399</u>
4.	Current Title	NTERNSHIP IN GEOGRAPHY		
	Proposed Title [†]			
	†If title is longer than 24 charac	ters (including spaces), write a ser	sible title (24 characters	or less) for use on transcripts:
		 	•	
5	Current number of credit hours:	_3 Propose	d number of credit hours:	<u>n/a</u>
6.	Currently, is this course repeatal	ble? YES 🛭 NO 🗌	If YES, current man	ximum credit hours: 6
	Proposed to be repeatable?	YES ⊠ NO □	If YES, proposed ma	cimum credit hours: 9
7.	Current grading system:	∠ Letter (A, B, C, etc.)	Pass/Fail	
	Proposed grading system:	Letter (A, B, C, etc.)	Pass/Fail	
8.	Courses must be described by at category, as applicable.	least one of the categories below.	Include the number of ac	tual contact hours per week for each
	Current: NA			
	() CLINICAL (_) COLLOQUIUM () DIS	CUSSION () L	ABORATORY () LECTURE
	\ <u></u>	() PRACTICUM ()		
	() SEMINAR ()	STUDIO () OTHER – P	ease explain:	
	Proposed:			
) COLLOQUIUM () DI		
	,——	() PRACTICUM (
	() SEMINAR () STUDIO () OTHER – I	tease explain:	
9.	Requested effective date (term/y	year): Fall /	2008	

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10.	Current teaching method: N/A	Community-Based Exp	erience	Service Learning Component	☐ Both			
	Proposed teaching method (if applicable):	Community-Based Expe	erience	Service Learning Component	☐ Both			
11.	Current cross-listing: N/A	Prefix and Number	NAME (of current cross-listing DEPARTM	ENT			
	a. Proposed – REMOVE the current cros	a. Proposed – REMOVE the current cross-listing:						
	b. Proposed – ADD a cross-listing:	Prefix and Number	Signatur	e of chair of proposed cross-listing	department			
12.	Current prerequisites:							
	Proposed prerequisites: N/A				14 14 14 14 14 14 14 14 14 14 14 14 14 1			
13.	Current Bulletin description: Provides supervised professional experience							
	nd working environments of careers in geography. Students should consult with a geography faculty member in advance							
	of registering for this class.							
	Proposed Bulletin description:							
				1.101				
14.	What has prompted this change? Number change to conform to A&S internship course numbers. Increase to a possible 9 credit hours to allow students more							
	experiential learning. No change in cou	rse content or emphasis.						
15.	If there are to be significant changes in the	content or teaching objectives o	f this cour	rse, indicate changes:				
16	Please list any other department that could be	ne affected by the proposed cha	nge.					
16.	None	so affected by the proposed chair	D~-					
17.	Will changing this course change the degree If YES [‡] , list below the programs that require		m on cam	pus?	ES 🛭 NO			
	‡In order for the course change to be considered.	lered, program change form(s)	for the pro	ograms above must also be submitte	:d.			
18.	Is this course currently included in the Univ		•	_	es 🛭 No			
19.	— Check box if If changed to 400	G- or 500-level, you must includ	<i>de a syllal</i> gnments b	bus showing differentiation for under y the graduate students; and/or (ii) t	ergraduate and the			

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19.	Check box if <u>changed to door 500</u> <u>changed to door 500</u> <u>graduate students by (i) received a 400G or 500.</u>	quiring additio	onal assignmen	its by the gradu	ate students; and/or (ii) th	graduate and e
20.	Within the department, who should be contacted for	further inform	nation on the p	proposed course	change?	
Nam	e: Matthew Zook, DUS	Phone: 2	257-8334	Email: _	zook@uky.edu	•
21.	Signatures to report approvals:	, _	. 0:1			
	10/31/07 DATE of Approval by Department Faculty	printed name	Ratz	eported by Den	artment Chair	signature
	,		das Back		llleuse-	
	DATE of Approval by College Faculty	printed name		Reported by C	ollege Dean	signature
	3/18/08	<	\rightarrow	Paros	- Dui	
	*DATE of Approval by Undergraduate Council	printed name	Reporte	ed by Undergra	duate Council Chair	signature
*DATE of Approval by Graduate Council		printed name	Repo	orted by Gradua	ate Council Chair	signature
			··	/		
	*DATE of Approval by Health Care Colleges Council (HCCC)	printed name	Reported b	y Health Care	Colleges Council Chair	signature
	*DATE of Approval by Senate Council		Reporte	ed by Office of	the Senate Council	
	*DATE of Approval by the University Senate		Reported	by the Office of	of the Senate Council	
*1	f applicable, as provided by the University Senate Rule	es. (<u>http://ww</u>	w.uky.edu/USC	C/New/Rulesan	dRegulationsMain.htm)	
	Evenuet from University Sanata Bulas	*****	***			
	Excerpt from University Senate Rules:					
	SR 3.3.0.G.2: Definition. A request may be criteria:	considered a t	ninor change i	f it meets one c	of the following	
	 a. change in number wit b. editorial change in the content or emphasis; 	hin the same le course title c	nundred series; or description v	; which does not	imply change in	
	c. a change in prerequisite which is made necess prerequisite(s);	ite(s) which do ary by the elir	oes not imply on ination or sig	change in conte nificant alterati	nt or emphasis, or on of the	
	d. a cross-listing of a co	urse under cor	nditions set for	th in <i>SR 3.3.0.1</i>	; ;	

e. correction of typographical errors.

Original Assignment
Change in Assignment

Camaata-/Vaan	
Semester/Year:	

Department of Geography 1457 Patterson Office Tower University of Kentucky Lexington, KY 40506-0027

GEOGRAPHY INTERNSHIP (GEO 480) INFORMATION SHEET

(To be completed by student and supervisors)

Student Name:		SS#:	
Student's College and Maj	or:	- Andrew -	
Faculty/Staff Supervisor:_	***		
Professional Supervisor:		and the second s	
Address:/			
Descriptive Title of Interns	ship Position:		
expected outcomes of the ϵ	experience; (3) mea	lities of the position; (2) learning us of evaluating student progress sor meeting dates, evaluation date	and learning.
Student Signature	Date	Supervisor Signature	Date
DUS, Geography	Date	-	

APEX Review for Course or Program Proposal

Changes in the major and/or minor requirements affect our current electronic degree audit system, APEX. How will the degree audit in APEX be affected by the course or program proposal? Please show in detail the changes and how they would impact major or minor requirements in your department or the College requirements if the proposal is approved. If you are unsure as to how to answer this question, please contact Sean Cooper in the Arts & Sciences Advising Center at sean.cooper@uky.edu or 257-8712 before filing this proposal.

Proposal: Course Number Change	
GEO 480 to GEO 399	
GEO 542 to GEO 442	
Impact on department major: NONE	
Impact on department minor: NONE	
Impact on College requirements: NONE	
Director of Undergraduate Studies:	
Signature of department DUS required:	7
Who should be consulted for further information on the proposed change?	
Name: Matthew Zook	
E-mail: zook@uky.edu	
Phone:7-8334	
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ARTS AND SCIENCES EDUCATIONAL POLICY COMMITTEE INVESTIGATOR REPORT

http://www.as.uky.edu/Admin/faculty/viewdocs/summary/

INVESTIGATING AREA: Soc. & Behav. Sci. COURSE, MAJOR, DEGREE of PROGRAM: 6-60, 480 to 6-60 399				
DATE FOR EPC REVIEW: CATEGORY: NEW, CHANGE DROP				
INSTRUCTIONS: This completed form will accompany the course application to the Graduate/Undergraduate Council(s) in order to avoid needless repetition of investigation. The following questions are included as an outline only. Be as specific and as brief as possible. If the investigation was routine, please indicate this. The term "course" is used to indicate one course, a series of courses or a program, whichever is in order. Return the form to <u>Leonidas Bachas Associate Dean, 275 Patterson Office Tower</u> for forwarding to the Council(s). ATTACH SUPPLEMENT IF NEEDED.				
1. List any modifications made in the course proposal as submitted originally and why.				
2. If no modifications were made, review considerations that arose during the investigation and the resolutions.				
3. List contacts with program units on the proposal and the considerations discussed therein. APEX form regnerted + fravided				
4. Additional information as needed.				
5. A&S Area Coordinator Recommendation: APPROVE, APPROVE WITH RESERVATION, OR DISAPPROVE				
6. A&S Education Policy Committee Recommendation:				
7. APPROVE, APPROVE WITH RESERVATION, OR DISAPPROVE A&S Educational Policy Committee, Jim Hougland, jghoug2@email.uky.edu 257-4417				
File: \InvestigatorRpt				