## APPLICATION TO DROP A COURSE

| 1. | Sub       | mitted by College of Arts & Sci   | ence             | Date  | October 30, 2007 |  |  |
|----|-----------|---|------------------|---|------------------|--|--|
|    | Dep       | artment/Division offering course  | Geography        |   |                  |  |  |
| 2. | Pref      | ix and Number GEO 516   | Title            | GI SYSTEMS & SCIENCE:<br>MANAGEMENT ISSUES.                         | Credits 3        |  |  |
| 3. | Effe      | ctive Date Fall 2008  |                  | (semester & year)   |                  |  |  |
| 4. | Why       | is the course to be dropped?  |                  |   |                  |  |  |
|    | The offer | The faculty member who designed this course is not longer at U.K. The course is not regularly offered and there are no plans to offer it any time in the future |                  |   |                  |  |  |
|    |           |   |                  |   |                  |  |  |
| 5. |           | dropping this course change the des, explain the change(s) below. (N  |                  | ents in one or more programs? Ta program change must be submitted.) | ☐ Yes ⊠ No       |  |  |
|    |           |   |                  |   |                  |  |  |
|    |           |   |                  |   |                  |  |  |
| 6. | Has       | the course been taken by a signific   | ant number of s  | tudents in other departments/colleges?                              | ☐ Yes ⊠ No       |  |  |
|    | a.        | If yes, list the college(s) or depa   | rtment(s) from   | which student enrollment in this course has                         | come, if known.  |  |  |
|    | b.        | What provision has been made f  | or meeting the i | needs of these students?  |                  |  |  |
|    |           |   |                  |   |                  |  |  |
| 7. | If so     | is course in current use in any of the please submit evidence (e.g., corrected.   |                  | Colleges?<br>at the Community College System has been               | ☐ Yes ⊠ No       |  |  |
| 8. | Is th     | is course currently included in the   | University Stud  | ies Program?  | ☐ Yes ⊠ No       |  |  |
| 9. | With      | nin the Department, who should be   | contacted for fi | urther information about this proposal?                             |                  |  |  |
|    | Mat       | thew Zook, DUS  |                  | 2:  | 57-8334          |  |  |
|    |           | N   | ame              |   | Phone Extension  |  |  |

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## Signatures of Approval:

| 10/31/67   | The win                                 |
|--|---|
| Date of Approval by Department Faculty                   | Reported by Department Chair            |
| 11/14/07   | lleer                                   |
| 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       |

Rev 07/06

<sup>\*</sup>If applicable, as provided by the Rules of the University Senate.

## EDUCATIONAL POLICY COMMITTEE INVESTIGATOR REPORT

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

| INVESTIGATING AREA: Soc. & Behav. Sci. COURSE, MAJOR, DEGREE or PROGRAM: 516  |
|---|
| 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 <b>Leonidas Bachas Associate Dean, 275</b> Patterson Office Tower 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.  |
| pone  |
| 3. List contacts with program units on the proposal and the considerations discussed therein.   |
| 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 WITH RESERVATION, OR DISAPPROVE  A&S Educational Policy Committee,  Jim Hougland, jghoug2@email.uky.edu 257-4417   |
| File \InvestigatorPat   |