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

| 1.                                                                                                                                    | Subi                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | mitted by College of Public Health                                                                                                                                     | 1                                 |                                                                                             | Date                    |  |
|---------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------------------------------------------------------------------|-------------------------|--|
|                                                                                                                                       | Dep                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | artment/Division offering course                                                                                                                                       | Gerontology                       |                                                                                             |                         |  |
| 2.                                                                                                                                    | Char<br>(a)                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | nges proposed: Present prefix & number GRN 78                                                                                                                          | 30 Proposed                       | d prefix & number                                                                           | GRN 780                 |  |
|                                                                                                                                       | (b) Present Title Applied Research Practicum I                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
|                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | New Title Applied Gerontology Practicum                                                                                                                                |                                   |                                                                                             |                         |  |
|                                                                                                                                       | (c)                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | If course title is changed and exceed characters) for use on transcripts:                                                                                              | ls 24 characters (Including space | es), include a sensible                                                                     | title (not to exceed 24 |  |
|                                                                                                                                       | (d)                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Present credits: 1                                                                                                                                                     |                                   | Proposed credits:                                                                           | Variable 1-3            |  |
|                                                                                                                                       | (e)                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Current lecture: laboratory ratio 1                                                                                                                                    | :0                                | Proposed:                                                                                   | NA                      |  |
|                                                                                                                                       | (f) Effective Date of Change: (Semester & Year) Fall 2007                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
| 3.                                                                                                                                    | To be Cross-listed as:  Prefix and Number  Signature: Department Chair                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
| <ul> <li>4. Proposed change in Bulletin description: <ul> <li>(a) Present description (including prerequisite(s):</li></ul></li></ul> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                        |                                   | perience in the organization and with GRN 790. Prereq: GRN iical application of gerontology |                         |  |
|                                                                                                                                       | in such domains as government, administration and clinical environments. In addition, the student will gain in-depth experience with the organization and an introduction to problems in applied research. Students will work under the supervision of a gerontology faculty member to coordinate efforts, establish timelines for completion, and determine grading criteria. May be repeated to a maximum of 6 credits. Approval of the Director of Graduate Studies required. |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
|                                                                                                                                       | (c) Prerequisite(s) for course as changed: none                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
| 5.                                                                                                                                    | What has prompted this proposal? This course can now be repeated for up to 6 credits and no longer requires conjunction with 790 to allow greater flexibility for students who wish to take this course.                                                                                                                                                                                                                                                                         |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
| 6.                                                                                                                                    | If there are to be significant changes in the content or teaching objectives of this course, indicate changes: Content has not changed.                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
| 7.                                                                                                                                    | What other departments could be affected by the proposed change? None                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
| 8.                                                                                                                                    | Is this course applicable to the requirements for at least one degree or certificate at the University of Kentucky?  X Yes No                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
| 9.                                                                                                                                    | Will changing this course change the degree requirements in one or more programs?*  [ Yes X No If yes, please attach an explanation of the change.*                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                        |                                   |                                                                                             |                         |  |
| 10.                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Is this course currently included in the University Studies Program?  If yes, please attach correspondence indicating concurrence of the University Studies Committee. |                                   |                                                                                             |                         |  |
| 11.                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | If the course is a 100-200 level course, please submit evidence (e.g., correspondence) that the Community College System has been consulted.                           |                                   |                                                                                             |                         |  |

\*NOTE: Approval of this change will constitute approval of the program change unless other program modifications are proposed.

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| 12.          | If the course is 400G or 500 level, include syllabi or course statement showing differentiation for undergraduate and graduat students in assignments, grading criteria, and grading scales.   Check here if 400G-500. |                                                                                                                                                                                   |  |  |
|--------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| 12.          | Is this a minor change? (NOTE: See the description on this form of the College to the Chair of the Senate Counc Council for normal processing.)                                                                        | Yes X No what constitutes a minor change. Minor changes are sent directly from the Dean of il. If the latter deems the change not to be minor, it will be sent to the appropriate |  |  |
| 13.          | Within the Department, who should be consu                                                                                                                                                                             | alted for further information on the proposed course change?                                                                                                                      |  |  |
|              | Name: John F. Watkins                                                                                                                                                                                                  | Phone Extension: 7-1450, ext. 80240                                                                                                                                               |  |  |
| <u>Sign</u>  | natures of Approval:                                                                                                                                                                                                   |                                                                                                                                                                                   |  |  |
|              |                                                                                                                                                                                                                        |                                                                                                                                                                                   |  |  |
| -            | 2-20-08  DATE of Approval by Department Faculty                                                                                                                                                                        | printed name Reported by Department Chair signature                                                                                                                               |  |  |
|              | 2-20-08                                                                                                                                                                                                                | Unda A Alexanda A A A A A A A A A A A A A A A A A A A                                                                                                                             |  |  |
|              | DATE of Approval by College Faculty                                                                                                                                                                                    | Linda A. Alexander  printed name Reported by College Bean Alexander  Reported by College Bean  signature  Assoc Dean for Academic Affairs                                         |  |  |
|              | *DATE of Approval by Undergraduate<br>Council                                                                                                                                                                          | printed nume Reported by Undergraduate Council Chair signature                                                                                                                    |  |  |
| <u></u>      | *DATE of Approval by Graduate Council                                                                                                                                                                                  | printed name Reported by Graduate Council Chair signature                                                                                                                         |  |  |
| <del>.</del> | *DATE of Approval by Health Care Colleges Council (HCCC)                                                                                                                                                               | Heid Anderson / Heid Melder printed name Reported by Health Care Colleges Council Chair signature                                                                                 |  |  |
|              | *DATE of Approval by Senate Council                                                                                                                                                                                    | Reported by Office of the Senate Council                                                                                                                                          |  |  |
|              | *DATE of Approval by the University Senate                                                                                                                                                                             | Reported by the Office of the Senate Council                                                                                                                                      |  |  |
| *If a        | pplicable, as provided by the University Senate 1                                                                                                                                                                      | Rules. ( <u>http://www.uky.edu/USC/New/RulesandRegulationsMain.</u> htm)                                                                                                          |  |  |
|              | Excerpt from University Senate Rules:                                                                                                                                                                                  | ·<br>*********                                                                                                                                                                    |  |  |
|              | SR 3.3.0.G.2: Definition. A request may criteria:                                                                                                                                                                      | be considered a minor change if it meets one of the following                                                                                                                     |  |  |
|              | b. editorial change in content or emphasi c. a change in prerequire which is made necessary prerequisite(s);                                                                                                           | uisite(s) which does not imply change in content or emphasis, or essary by the elimination or significant alteration of the course under conditions set forth in SR 3.3.0.E;      |  |  |