Course Information

1a. Prefix and Number: HIS - History, HIS 548 HIS MID EAST: 1453-1020

1b. Course Title: HIS MID EAST: 1453-1020

1c. Credit Hours: 3.0

1d. Submitted by the College of: College of Arts &Sciences

Date Submitted: 2/4/2013

1e. Department/Division: History

Contact Person

Name: Karen Petrone

Email: petrone@uky.edu

Phone: 257-4345

Responsible Faculty ID (if different from Contact)

Name: Karen Petrone

Email: petrone@uky.edu

Phone: 257-4345

Effective Date of Drop: Semester Following Approval OR:

Cross Listing:

Cross-listed course prefix and number: none

Should the cross-listed course(s) also be dropped?: No

Explain, if necessary:

Why is this course being dropped?: Professor Robert Olson taught this class. He retired some years ago and the course has not been taught in several years. No current member of the department is going to take over teaching the course.

Will dropping this course change the requirements for any program?: No

If Yes, list the program(s) here:

Has the course been taken by a significant number of students in other colleges/depts?: No

If YES, list the colleges/departments:

If YES, what provision has been made for meeting the needs of these students?:

Is this course currently included in the University Studies Program?: No

Instructor Name:

RECEIVED

APR 27 20/5

OFFICE OF THE SENATE COUNCIL



Drop Course Report

SIGNATURE|PETRONE|Karen Petrone|Dept approval for ZCOURSE_DROP HIS 548|20150223

SIGNATURE|ACSI222|Anna C Harmon|College approval for ZCOURSE_DROP HIS 548|20150224

SIGNATURE|JMETT2|Joanie Ett-Mims|Undergrad Council approval for ZCOURSE_DROP HIS 548|20150414

SIGNATURE|ZNNIKO0|Roshan Nikou|Graduate Council approval for ZCOURSE_DROP HIS 548|20150427

Drop Course Form

Open in full window to print or sav	<u>e</u>			Ger
Attachments:				
Browse] Пр	load File		
		(* denotes requ	uired fields)	
Course Information. • a.* Course Prefix and Number:	•			
HIS - History	**********			
HIS 548 HIS MID EAST: 145	53-1020			
h Course Tiller				
b. Course Title; c. Credit Hours;	HIS MID EAST: 145:	3-1020	İ	
. d.* Submitted by the College of	College of Arts & Sci	iences	Submission Date: 2/4/2013	
e.* Department/Division:	History			1
• f.			· 	_
* Contact Person Name:	Karen Petrone	Email: petrone@uky.e	Phone: 257-4345	
* Responsible Faculty ID (if different from Contact)	Karen Petrone	Email: petrone@uky.e	edu Phone: 257-4345	
,			•	
Effective Date ¹ of Drop:* @ Semes	ter Following Approva	al OR O Specific Term	elect	4
Should the cross-listed course(s) also Explain, if necessary:	vbe dropped³? ⊜ Ye	s O No		
		4		
Why is this course being dropped?		***************************************		
Professor Robert Olson taught years. No current member of			go and the course has not been teaching the course.	taught in several
		, , <u> </u>	y	
			•	
		•		
Will dropping this course change t	ne requirements ⁴ for	any program?* 🗇 Yes @	® No	
Names and As	VI	5-1-1-A-mon V1-1-A-M-14-W-14-T-V-14-	; *	
If YES ⁴ , list the program(s) here:			•	
Has the course been taken by a sig	nificant number of s	tudents in other colleges	/depts?* ⊜ Yes ® No	
	nificant number of s	tudents in other colleges	/depts?* ○ Yes ® No	
Has the course been taken by a sig If YES, list the colleges/departments: If YES, what provision has been made	1,0%		depts?* ⊙ Yes ® No	
f YES, list the colleges/departments:	1,0%		/depts?* ⊙ Yes ® No	

The effective data for a dropped course is the first term when the course is not available, NOT the last term the course is offered.

² Effective dates are typically the semester following approval. No course will be made effective until all approvals are received.

³ 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.