DROP COURSE FORM

1.	**General Information.**		Today's Date:	4/5/12
a.	Submitted by the College of:	Arts & Science		
b.	Department/Division:	History	Email: dehami01@uky.edu	Phone: 7-3104
c.	Contact Person Name:	David Hamilton		

2.	**Course Information.**		
a.	Course Prefix and Number:	HIS 711	
b.	Course Title:	Seminar in American History, 1607-1815	
c.	Credit Hours:	3	
3.	Effective Date[1] of Drop:	☒ Semester Following Approval OR ☐ Specific Term[2]: _____	YES[3] ☐ NO ☒
4.	Is this course cross-listed?		
	If YES[3], what is the cross-listed course prefix and number? _____		YES[3] ☐ NO ☐
	If YES[3], should the cross-listed course(s) also be dropped[3]?		
	Explain, if necessary: _____		
5.	Why is the course being dropped?	Chronological focus is dated; course doesn't make	YES ☐ NO ☒
6.	Will dropping this course change the requirements[4] for any program?		
	If YES[4], list the program(s) here: _____		YES ☐ NO ☒
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? _____		YES ☐ NO ☒
8.	Is this course currently included in the University Studies Program?		

---

[1] 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 offer

[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.

Rev 8/09

DROP COURSE FORM

Signature Routing Log

General Information:

Course to be Dropped (prefix and number):   HIS 711

Proposal Contact Person Name: David Hamilton   Phone: 7-3104   Email: dehami01@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
Grad. Committee	April 2012	David Hamilton / 7-3104 / dehami01	David E. Hamilton
Chair	April 2012	Karen Petrone / 7-4343 / petrone@uky.edu	Karen Petrone
		/ /	
		/ /	
		/ /	

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision[5]
Undergraduate Council			
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

___

---

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