RECEIVED

UNIVERSITY OF KENTUCKY APPLICATION TO DROP A COURSE

OCT 17 07

OFFICE OF THE SENATE COUNCIL

1.	Submitted by College of Honor's Program Date 5/17/07
	Department/Division offering course Honors Program
2.	Prefix and Number HON 201A Title World Food Issues: Trade—Credits Off S Between Food & Noct 1 Resources
3.	Effective Date Spring 2007 (semester & year)
4.	Why is the course to be dropped?
	Senate approved creation of HON 211 as a
	Senate approved creation of HON 211 as a new course, which replaces this one.
5.	Will dropping this course change the degree requirements in one or more programs? If yes, explain the change(s) below. (NOTE – If "yes," a program change must be submitted.)
6.	Has the course been taken by a significant number of students in other departments/colleges?
	a. If yes, list the college(s) or department(s) from which student enrollment in this course has come, if known.
	b. What provision has been made for meeting the needs of these students?
7.	Is this course in current use in any of the Community Colleges? If so, please submit evidence (e.g., correspondence) that the Community College System has been consulted.
8.	Is this course currently included in the University Studies Program?
9.	Within the Department, who should be contacted for further information about this proposal?
	Meg Marguis Name Name
	J L Name Phone Extension

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5/17/07	Mallaray
Date of Approval by Department Faculty	Reported by Department Chair
Date of Approval by College Faculty	Reported by College Dean
*Date of Approval by Undergraduate Council	Reported by Undergraduate Council Cl
*Date of Approval by Graduate Council	Reported by Graduate Council Chai
*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

OL: 17 07

OFFICE OF THE SENATE COUNCIL

UNIVERSITY SENATE ROUTING LOG

Proposal Title: DROP HON 2014

Name/email/phone for proposal contact: Meg Marquis/Internação enail/uty.edu/257-311/

Instruction: To facilitate the processing of this proposal please identify the groups or individuals reviewing the proposal, identify a contact person for each entry, provide the consequences of the review (specifically, approval, rejection, no decision and vote outcome, if any) and please attach a copy of any report or memorandum developed with comments on this proposal.

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Review Summary Attached?				
Date of Proposal Review				
Consequences of Review:				
Contact person Name (phone/email)				
Reviewed by: (Chairs, Directors, Faculty Groups, Contact person Faculty Councils, Committees, etc) Name (phone/email)				