DROP COURSE FORM

1.	General Information.		
a.	Submitted by the College Of: Agriculture	Today's Date: <u>1/</u>	<u>13/2012</u>
b.	Department/Division: <u>Landscape Architecture</u>		
c.	Contact Person Name: Ned Crankshaw Email: ned.cran	kshaw@uky.edu Pho	ne: 257-4691
2.	Course Information.		
a.	Course Prefix and Number: <u>LA 971</u>		
b.	Course Title: Senior Project		- .
c.	Credit Hours: 3		
3.	Effective Date ¹ of Drop: Semester Following Approval OR	Specific Term ² :	
4.	Is this course cross-listed?		YES ³ NO 🔀
	If YES ³ , what is the cross-listed course prefix and number?		
	If YES ³ , should the cross-listed course(s) also be dropped ³ ?		YES ³ NO
	Explain, if necessary:		
5.	Why is the course being dropped? Although offered, no students ha	ve enrolled in this cours	se for several years.
6.	Will dropping this course change the requirements ⁴ for any program	YES NO	
	If YES ⁴ , list the program(s) here:		
7.	Has the course been taken by a significant number of students in o	ther colleges/depts?	YES NO
	If YES, list the colleges/departments:		
:	If YES, what provision has been made for meeting the needs of these	e students?	
8.	Is this course currently included in the University Studies Program?	· · · · · · · · · · · · · · · · · · ·	YES NO

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 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.

DROP COURSE FORM

Signature Routing Log

General Information:

Course to be Dropped (prefix and number): LA 971

Proposal Contact Person Name:

Ned Crankshaw

Phone: <u>257-</u>

Email:

4691

ned.crankshaw@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
Landscape Architecture Dept	1/26/2012	Ned Crankshaw / 257-4691 / ned.crankshaw@uky.edu	
Undergraduate Curriculum Comm., COA	2/17/2012	Larry Grabau / 7-3469 / larry.grabau@uky.edu	
		/ /	
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External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ⁵
Undergraduate Council	3/27/2012	Sharon Gill	
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

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