

REQUEST FOR CHANGE IN MASTERS DEGREE PROGRAM

1. GENERAL INFORMATION

College:	Design	Department:	Historic Preservation
Current Major Name:	Historic Preservation	Proposed Major Name:	n/c
Current Degree Title:	MA	Proposed Degree Title:	n/c
Formal Option(s):		Proposed Formal Option(s):	
Specialty Fields w/in Formal Option:		Proposed Specialty Fields w/in Formal Options:	
Date of Contact with Associate Provost for Academic Administration ¹ :	2/17/2011		
Bulletin (yr & pgs):	2010-11, p. 174	CIP Code ¹ :	50.0408
Today's Date:	3/3/2011		
Accrediting Agency (if applicable):			
Requested Effective Date:	<input type="checkbox"/> Semester following approval. OR <input checked="" type="checkbox"/> Specific Date ² : F' 2011		
Dept. Contact Person:	Allison Carll	Phone:	7-7763
Email:	hedcarll@uky.edu		

2. CHANGE(S) IN PROGRAM REQUIREMENTS

		<u>Current</u>	<u>Proposed</u>
1.	Number of transfer credits allowed (Maximum is Graduate School limit of 9 hours or 25% of course work)	9	9
2.	Residence requirement (if applicable)	n/a	n/a
3.	Language(s) and/or skill(s) required	n/a	n/a
4.	Termination criteria	same as Grad School	<i>same as Grad School</i>
5.	Plan A Degree Plan requirements ³ (thesis)	n/a	n/a
6.	Plan B Degree Plan requirements ³ (non-thesis)	6	6
7.	Distribution of course levels required (At least one-half must be at 600+ level & two-thirds must be in organized courses.)	3 cr. @ 490G 27 cr. @ 600-level 9 cr. @ 700-level 9 hr of electives	3 cr. @ 490G 27 cr. @ 600-level 9 cr. @ 700-level 9 hr of electives
8.	Required courses (if applicable)	GEO 490G American Land HP 601 Intro Hist Preser HP 602 Dyn of Hist Preser HP 610 Am Arch I HP 611 Am Arch II	<i>GEO 490G American Land HP 601 Intro Hist Preser HP 602 Dyn of Hist Preser HP 610 Am Arch I HP 611 Am Arch II</i>

¹ Prior to filling out this form, you MUST contact the Associate Provost for Academic Administration (APAA). If you do not know the CIP code, the APAA can provide you with that during the contact.

² Program changes are typically made effective for the semester following approval. No changes will be made effective until all approvals are received.

³ If there is only one plan for the degree, plans involving a thesis (or the equivalent in studio work, etc.) should be discussed under Plan A and those not involving a thesis should be discussed under Plan B.

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		HP 612 Document I HP 613 Hist Struct HP 614 Document II HP 616 Preserv Design Stud HP 723 KY Arch & Cult HP 798 Master's Proj I HP 799 Master's Project II	<i>HP 612 Document I</i> <i>HP 613 Hist Struct</i> <i>HP 614 Document II</i> <i>HP 616 Preserv Design Stud</i> <i>HP 798 Research Design</i> <i>HP 799 Master's Project</i> <i>(repeat HP 799 once)</i>
9.	Required distribution of courses within program (if applicable)	see #7	see #7
10.	Final examination requirements	oral defense	<i>oral defense</i>
11.	Explain whether the proposed changes to the program (as described in sections 1 to 10) involve courses offered by another department/program. <u>Routing Signature Log must include approval by faculty of additional department(s).</u>		
12.	List any other requirements not covered above?		
13.	Please explain the rationale for changes. If the rationale involves accreditation requirements, please include specific references to those requirements.		
	These changes are being proposed to tighten up the program, speed the time to receipt of the degree, and give students a more appropriate number of credits for their work on their Master's project.		

CHANGE MASTERS DEGREE PROGRAM FORM
Signature Routing Log

General Information:

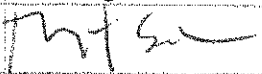
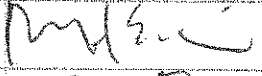
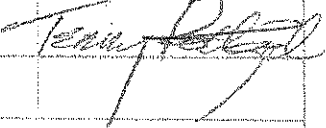
Proposal Name: Historic Preservation

Proposal Contact Person Name: Allison Carll Phone: 7-7763 Email: hedcarll@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
HP Curriculum Committee	11/30/10	Richard Schein / 7-2119 / schein@email.uky.edu	
HP Faculty	1/18/11	Richard Schein / 7-2119 / schein@email.uky.edu	
CoD Curriculum Committee	3/2/11	Terry Rothgeb / 7-7762 / hdstdr@uky.edu	
		/ /	
		/ /	

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ⁴
Undergraduate Council			
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

⁴ Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.