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UNIVERSITY OF KENTUCKY APPLICATION TO DROP A COURSE

FEB 22 08

Submitted by College of Agriculture	Date	2/13/07	OFFICE OF TH SENATE COUNC
Department/Division offering course HES School NFS Department			· · · · · · · · · · · · · · · · · · ·
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Prefix and Number NFS 511 Title Therapeutic Nutr	ition	Credits	4
Effective Date Fall 2007 Simultaneous with approval of NFS 515	(semester & year)	Fall 2007	
Why is the course to be dropped?			
The content of NFS 511 and NFS 513 is being integrated into a new Therapy. This is consistent with CADE accreditation and practices in coll drop NFS 511 accompanies the Application to Drop NFS 513.			
			· .
Will dropping this course change the degree requirements in one or more	programs?	x Yes	□ No
If yes, explain the change(s) below. (NOTE – If "yes," a program change	must be submitted.)		
The BS in Dietetics will require NFS 515 rather than NFS 511 and 513.		·	
Has the course been taken by a significant number of students in other dep	partments/colleges?	Yes	X No
a. If yes, list the college(s) or department(s) from which student enrol	llment in this course has co	me, if known.	
b. What provision has been made for meeting the needs of these stude	ents?		
Is this course in current use in any of the Community Colleges?		☐ Yes	x No
If so, please submit evidence (e.g., correspondence) that the Community College System has been consulted.			
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Is this course currently included in the University Studies Program?	FEB 2 92008	Yes	x No
Within the Department, who should be contacted for further information a	about this proposal?		

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Signatures of Approval:

2/06/06	Réported by Départment Chair		
Date of Approval by Department Faculty	Réported by Department Chair		
Will the same of t	12/6/07		
Date of Approval by College Faculty	Reported by College Dean		
*Date of Approval by Undergraduate Council	Reported by Undergraduate Council Chair		
*Date of Approval by Graduate Council	Reported by Graduate Council Chair		
Date of Approval by Graduate Council	Reported by Graduate Council Chair		
*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		

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^{*}If applicable, as provided by the Rules of the University Senate.

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			Date	2/13/07	
Depa	rtment/Division offering course <u>HES</u>	School NFS Department			
Prefi	x and Number NFS 513	Title Advanced The	erapeutic Nutrition	Credits	_2_
Effec	tive Date Fall 2007 Simultaneous wit	th approval of NFS 515	(semester & year)	Fall 2007	
Why	is the course to be dropped?				
	The content of NFS 511 and NFS 513 app. This is consistent with CADE accre NFS 513 accompanies the Application t	ditation and practices in o			
				•	
					*
	dropping this course change the degree is, explain the change(s) below. (NOTE -			☐ Yes	[]
•		·			
		p			<u> </u>
Has 1	he course been taken by a significant nu	mber of students in other	departments/colleges?	Yes	X
a.	If yes, list the college(s) or department	t(s) from which student er	nrollment in this course has co	ome, if known.	
b.	What provision has been made for med	eting the needs of these st	tudents?		,
			M.C. Marie Control		
Is thi	s course in current use in any of the Con	nmunity Colleges?	:	☐ Yes	×
If so,	please submit evidence (e.g., corresponulted.	dence) that the Communi	ty College System has been THE GRADUATE SCHOOL RECEIVED		
Is thi	s course currently included in the Unive	rsity Studies Program?	FEB 2 9 2008	☐ Yes	x
			· · · · ·		

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Signatures of Approval:

Rev 07/06

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