REQUEST FOR COURSE CHANGE (MAJOR AND MINOR)

Complete 1a - 1f & 2a - 2c. Fill out the remainder of the form as applicable for items being changed.

1.	General Information.						
a.	Submitted by the College of: Agriculture Today's Date: 10/12/09				2/09		
b.	Depart	Department/Division: <u>Interdisciplinary Program</u>					
c.	Is there	Is there a change in "ownership" of the course?					
	If YES,	If YES, what college/department will offer the course instead?					
d.	What type of change is being proposed? Major I Minor¹ (place cursor here for minor change definition)						
e.	Contac	Contact Person Name: <u>Dr. Mary Arthur</u> Email: <u>marthur@uky.edu</u> Phone: <u>859-257-2852</u>					859-257-2852
f.	Reques	sted Effective Date:	Semester Foll	owing Approval	OR Sp	pecific Term ² : <u>Fa</u>	<u>ll 2010</u>
2.	Designation and Description of Proposed Course.						
a.	Current Prefix and Number: NRC 301 Proposed Prefix & Number: NRE 301						
b.	Full Title: Natural Resource Conservation and Management Proposed Title: Natural Resources and Environmental Science				nmental Science		
c.	Current Transcript Title (if full title is more than 40 characters): <u>n/a</u>						
c.	Proposed Transcript Title (if full title is more than 40 characters): n/a						
d.	Current Cross-listing: N/A OR Currently ³ Cross-listed with (Prefix & Number):						
	Proposed – ADD³ Cross-listing (Prefix & Number):						
	Proposed – REMOVE ^{3, 4} Cross-listing (Prefix & Number):						
e.	e. Courses must be described by <u>at least one</u> of the meeting patterns below. Include number of actual contact hours ⁵ for each meeting pattern type.						
Curi	rent:	<u>3</u> Lecture	Laboratory ⁵	Recita	tion	Discussion	Indep. Study
		Clinical	Colloquium	Practio	cum	Research	Residency
		Seminar	Studio	Other – Plea	se explain:		
Prop	oosed:	<u>3</u> Lecture .	Laboratory	Recitat	tion	Discussion	Indep. Study
		Clinical	Colloquium	Praction	cum	Research	Residency
Seminar Studio Other – Please explain:							
f.	f. Current Grading System:						
	Proposed Grading System: \(\simeg \) Letter (A, B, C, etc.) \(\subseteq \) Pass/Fail						
g. Current number of credit hours: $\underline{3}$ Proposed number of credit hours: $\underline{3}$							

¹ See comment description regarding minor course change. *Minor changes are sent directly from dean's office to Senate Council Chair.* If Chair deems the change as "not minor," the form will be sent to appropriate academic Council for normal processing and contact person is informed.

² Courses are typically made effective for 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.

 $^{^4}$ Removing a cross-listing does not drop the other course – it merely unlinks the two courses.

⁵ Generally, undergrad courses are developed such that one semester hr of credit represents 1 hr of classroom meeting per wk for a semester, exclusive of any lab meeting. Lab meeting generally represents at least two hrs per wk for a semester for 1 credit hour. (See SR 5.2.1.)

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h.	Currently, is this course repeatable for a	YES NO				
	Proposed to be repeatable for additional	YES NO 🛛				
	If YES: Maximum number of credit hours:					
	If YES: Will this course allow multiple	registrations during the same semester?	YES NO			
i.	Current Course Description for Bulletin: An introductory course in conservation and management of natural resources at an ecosystem level. Students will write a range of paper about natural resource issues. An overnight field trip is required.					
	Proposed Course Description for Bulletin: An introductory course in management of natural resources as supported by environmental science at an ecosystem level. Students will write a range of paper about natural resource issues. An overnight field trip is required.					
j.	Current Prerequisites, if any: ENG 1	04 and sophomore standing				
	Proposed Prerequisites, if any: same					
k.	Current Distance Learning(DL) Status: N/A Already approved for DL* Please Add Please Drop					
	*If already approved for DL, the Distance Learning Form must also be submitted <u>unless</u> the department affirms (by checking this box) that the proposed changes do not affect DL delivery.					
1.	Current Supplementary Teaching Component, if any:					
	Proposed Supplementary Teaching Component:					
3.	Currently, is this course taught off campus?					
	Proposed to be taught off campus? YES □ NO □					
4.	Are significant changes in content/teaching objectives of the course being proposed? YES NO					
	If YES, explain and offer brief rationale:					
5.	Course Poletieschie to Program/s)					
	land the state of					
a.	a. Are there other depts and/or pgms that could be affected by the proposed change? If YES, identify the depts. and/or pgms:					
b. Will modifying this course result in a new requirement for ANY program? YES NO						
If YES ⁷ , list the program(s) here:						
6.	6. Information to be Placed on Syllabus. Check how is If changed to 400G- or 500-level course you must send in a syllabus and you must include the					
a.	a. Check box if changed to 400G or 500. Check bo					

You must also submit the Distance Learning Form in order for the course to be considered for DL delivery.
 In order to change a program, a program change form must also be submitted.

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Signature Routing Log

General Information:

Course Prefix and Number:

NRC prefix to NRE prefix

Proposal Contact Person Name:

Dr. Mary Arthur

Phone: <u>257-</u>

2852

Email: marthur@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 May A.A.	
Natural Resource Conservation and Management Steering Committee	10.12.09			
Undergraduate Curr. Comm. 604	10-16-09	Lary Grabey 17-1885 eng, luky.	dy Lough Hat	
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External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ⁸
Undergraduate Council	1-19-20100	ici	
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:	

⁸ Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.