

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: <u>Agriculture</u>	Today's Date:	<u>10/12/09</u>		
b.	Department/Division: <u>Interdisciplinary Program</u>				
c.	Is there a change in "ownership" of the course?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>		
	If YES, what college/department will offer the course instead? _____				
d.	What type of change is being proposed? <input checked="" type="checkbox"/> Major	<input type="checkbox"/> Minor ¹ (place cursor here for minor change definition)			
e.	Contact Person Name: <u>Dr. Mary Arthur</u>	Email: <u>marthur@uky.edu</u>	Phone: <u>257-2852</u>		
f.	Requested Effective Date: <input type="checkbox"/> Semester Following Approval	OR	<input checked="" type="checkbox"/> Specific Term ² :	<u>Fall 2010</u>	
2. Designation and Description of Proposed Course.					
a.	Current Prefix and Number: <u>NRC 399</u>	Proposed Prefix & Number:	<u>NRE 399</u>		
b.	Full Title: <u>Experiential Education in Natural Resources</u>	Proposed Title:	<u>Experiential Education in Natural Resources and Environmental Science</u>		
c.	Current Transcript Title (if full title is more than 40 characters): _____				
c.	Proposed Transcript Title (if full title is more than 40 characters): <u>Experiential Ed in Nat Resources Env Sci</u>				
d.	Current Cross-listing: <input checked="" type="checkbox"/> N/A	OR	Currently ³ Cross-listed with (Prefix & Number): _____		
	Proposed – <input type="checkbox"/> ADD ³ Cross-listing (Prefix & Number): _____				
	Proposed – <input type="checkbox"/> REMOVE ^{3,4} Cross-listing (Prefix & Number): _____				
e.	Courses must be described by at least one of the meeting patterns below. Include number of actual contact hours⁵ for each meeting pattern type.				
Current:	<input type="checkbox"/> Lecture	<input type="checkbox"/> Laboratory ⁵	<input type="checkbox"/> Recitation	<input type="checkbox"/> Discussion	<input type="checkbox"/> Indep. Study
	<input type="checkbox"/> Clinical	<input type="checkbox"/> Colloquium	<input type="checkbox"/> Practicum	<input type="checkbox"/> Research	<input type="checkbox"/> Residency
	<input type="checkbox"/> Seminar	<input type="checkbox"/> Studio	<u>3</u> Other – Please explain:	<u>Internship</u>	
Proposed:	<input type="checkbox"/> Lecture	<input type="checkbox"/> Laboratory	<input type="checkbox"/> Recitation	<input type="checkbox"/> Discussion	<input type="checkbox"/> Indep. Study
	<input type="checkbox"/> Clinical	<input type="checkbox"/> Colloquium	<input type="checkbox"/> Practicum	<input type="checkbox"/> Research	<input type="checkbox"/> Residency
	<input type="checkbox"/> Seminar	<input type="checkbox"/> Studio	<u>3</u> Other – Please explain:	<u>Internship</u>	
f.	Current Grading System:	<input checked="" type="checkbox"/> Letter (A, B, C, etc.)	<input type="checkbox"/> Pass/Fail		
	Proposed Grading System:	<input checked="" type="checkbox"/> Letter (A, B, C, etc.)	<input type="checkbox"/> Pass/Fail		
g.	Current number of credit hours: <u>Up to 6</u>	Proposed number of credit hours:	<u>3</u>		

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 additional credit?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<i>Proposed to be repeatable for additional credit?</i>	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
If YES: Maximum number of credit hours:	<u>6</u>	
If YES: Will this course allow multiple registrations during the same semester?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
i. Current Course Description for Bulletin:	<u>A field-based pre-professional learning experience in natural resources under the supervision of a faculty member and completion of a learning contract. May be repeated to a maximum of six credits.</u>	
Proposed Course Description for Bulletin:	<u>A learning experience in natural resources and environmental sciences conducted under the supervision of a faculty member and with clear relevance to the student's Environmental Systems Emphasis Area. The goal of this requirement is to provide the student with pre-professional experiential learning experience in their chosen emphasis area within natural resources and environmental science.</u>	
j. Current Prerequisites, if any:	<u>Consent of appropriate faculty and approval by NRCM Internship Coordinator</u>	
Proposed Prerequisites, if any:	<u>same</u>	
k. Current Distance Learning(DL) Status:	<input checked="" type="checkbox"/> N/A <input type="checkbox"/> Already approved for DL* <input type="checkbox"/> Please Add ⁶ <input type="checkbox"/> 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 <input type="checkbox"/>) that the proposed changes do not affect DL delivery.		
l. Current Supplementary Teaching Component, if any:	<input type="checkbox"/> Community-Based Experience <input type="checkbox"/> Service Learning <input type="checkbox"/> Both	
Proposed Supplementary Teaching Component:	<input type="checkbox"/> Community-Based Experience <input type="checkbox"/> Service Learning <input type="checkbox"/> Both	
3. Currently, is this course taught off campus?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
<i>Proposed to be taught off campus?</i>	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
4. Are significant changes in content/teaching objectives of the course being proposed?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
If YES, explain and offer brief rationale: _____		

5. Course Relationship to Program(s).		
a. Are there other depts and/or pgms that could be affected by the proposed change?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
If YES, identify the depts. and/or pgms: _____		
b. Will modifying this course result in a new requirement⁷ for ANY program?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
If YES ⁷ , list the program(s) here: _____		
6. Information to be Placed on Syllabus.		
a.	<input type="checkbox"/> Check box if changed to 400G or 500.	If <u>changed to</u> 400G- or 500-level course you must send in a syllabus and you must include the <u>differentiation</u> between undergraduate and graduate students by: (i) requiring additional assignments by the graduate students; and/or (ii) establishing different grading criteria in the course for graduate students. (See SR 3.1.4.)

⁶ You must also submit the Distance Learning Form in order for the course to be considered for DL delivery.

⁷ 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: 257- Email: marthur@uky.edu
2852

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
Natural Resource Conservation and Management Steering Committee	10-12-09	Mary Arthur / 257-2852 / marthur@uky.edu	<i>Mary Arthur</i>
Undergraduate Carr. Comm COA	10-16-09	Larry Graban 17-1588 <i>lgraban@emba.uky.edu</i>	<i>Larry Graban</i>
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		/ /	
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External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ³
Undergraduate Council	1-19-2010	<i>[Signature]</i>	
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

³ Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.