

CHANGE DOCTORAL DEGREE PROGRAM FORM

GENERAL INFORMATION

College: <u>Public Health</u>		Department: <u>Epidemiology</u>	
Current Major Name: <u>Epidemiology/Biostatistics</u>		Proposed Major Name: <u>no change</u>	
Current Degree Title: <u>Ph.D.</u>		Proposed Degree Title: <u>no change</u>	
Current Formal Option(s): <u>na</u>	Proposed Formal Option(s): <u>na</u>		
Current Specialty Fields w/in Formal Option: <u>na</u>	Proposed Specialty Fields w/in Formal Option: <u>na</u>		
Date of Contact with Associate Provost for Academic Administration ¹ : _____			
Bulletin (yr & pgs): <u>Spring, 2012, pp. 194-196</u>	CIP Code ¹ : <u>26.9999</u>	Today's Date: <u>7/29/2013</u>	
Accrediting agency (if applicable): <u>Council on Education for Public Health (CEPH)</u>			
Requested Effective Date: <input checked="" type="checkbox"/> Semester following approval.		OR	<input type="checkbox"/> Specific Date ² : _____
Dept Contact Person: <u>Steve Browning</u>	Phone: <u>218-2235</u>	Email: <u>srbrown@email.uky.edu</u>	

CHANGE(S) IN PROGRAM REQUIREMENTS

	<u>Current</u>	<u>Proposed</u>
1. Number of transfer credits allowed: <i>(Maximum is Graduate School limit of total of 9 hours (or 25% of the credit hours needed to fulfill the pre-qualifying residency requirement.)</i>	<u>9 credit hours</u>	<u>no change</u>
2. Residence requirement: <i>(Minimum of one year before and after Qualifying Exams.)</i>	<u>2 years before and 1 year after qualifying examination</u>	<u>no change</u>
3. Language(s) and/or skill(s) required:	<u>na</u>	<u>no change</u>
4. Provisions for monitoring progress and termination criteria:	<u>Cumulative grade point average of 3.00 or above; no grade of "E" or "U"; at most one grade of "I" remaining to be resolved; at most one grade of "C"; at most one grade of "W"; comprehensive examination passed at PhD level if taken; qualifying examination passed if taken; final examination passed if taken; Graduate School time limits not exceeded.</u>	<u>no change</u>
5. Total credit hours required:	<u>58</u>	<u>no change</u>
6. Required courses:	<u>CPH 701 (1); CPH 712 (3); BST 675 (4); BST 681 (3); CPH 786 (3);</u>	<u>CPH 663 (3); CPH 712 (3); BST 675 (4); BST 681 (3); CPH 786 (1);</u>

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 Programs are typically made effective for the semester following approval. No program will be made effective until all approvals are received.

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	<u>CPH 714 (3); BST 676 (4); BST 682 (3); EPI 715 (3); BST 761 (3); BST 762 (3); CPH 711 (3); CPH 767 (4) plus 18 hours of electives</u>	<u>CPH 714 (3); BST 676 (4); BST 682 (3); EPI 715 (3); BST 761 (3); BST 762 (3); CPH 711 (3); CPH 767 (4) plus 18 hours of electives</u>
7. Required distribution of courses within program:	<u>BST 675, BST 681, BST 676, BST 682, BST 761, CPH 712, EPI 714, and EPI 715 prior to comprehensive examination; core curriculum (39 credits) prior to qualifying examination</u>	<i>no change</i>
8. Minor area or courses outside program required:	<i>na</i>	<i>na</i>
9. Distribution of courses levels required (400G-500/600-700):	<u>maximum of 6 credit hours at 400G/500 level, remaining courses at 600/700 level.</u>	<i>no change</i>
10. Qualifying examination requirements:	<u>Require the student to furnish the dissertation committee with a written dissertation document in progress (minimum 2 weeks in advance) as well as to prepare slides for an oral presentation describing the student's current progress and the student's proposal to complete the dissertation research (approximately 20-30 slides). During and after the oral presentation, the dissertation committee may ask the student questions about the content of the written dissertation document in progress, the oral presentation, and topics in epidemiology and biostatistics deemed relevant to evaluation of the student's competence to complete the dissertation research. The possible outcomes are Pass and Fail.</u>	<i>no change</i>
<p>11. Explain whether the proposed changes to the program (as described in numbers 1 through 10) involve courses offered by another department/program. <u>Routing Signature Log must include approval by faculty of additional department(s).</u></p> <p><u>CPH 663 is the only addition. Since this course is taught at the college level and is a requirement of the college's accrediting body, further approval is not necessary.</u></p>		
12. Other requirements not covered above:		
<i>na</i>		
13. What is the rationale for the proposed changes? If the rationale involves accreditation requirements, please include specific references to those requirements.		
<u>The only changes in program are listed in item #6 -- addition of CPH 663 (3) and exclusion of two, 1-credit hour doctoral seminars (CPH 786). Review of program curriculum and student progress/success by program faculty</u>		

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revealed that one-credit hour of doctoral seminar met student's needs in meeting course objectives. Therefore, two credit hours of CPH 786 were dropped from the curriculum. CPH 663 is a 3-credit introduction to the breadth of public health and has been developed by the college to meet accreditation standards (see below) for all of the college's graduate and professional programs, replacing CPH 701 (1). According to Accreditation Criteria - Public Health Programs (CEPH, as ammended June, 2011) academic degree programs must ensure that "students are familiar with and competent in public health areas outside the concentration ... [they] will require at least the equivalent of three semester-credit hours of instruction that introduces students to the breadth of public health and at least the equivalent of three semester-credit hours of instruction in epidemiology." (p.21).

SIGNATURE ROUTING LOG

General Information:




Proposal Name: MS Clinical Research Design

Proposal Contact Person Name: David Mannino Phone: 218-2099 Email: dmannino@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
Academic Affairs Committee	1/23/2014	Steve Browning/218-2235/srbrown@uky.edu	
Faculty Council	2/11/2014	Steve Fleming/218-2229/steven.fleming@uky.edu	
Academic Dean-Public Health	2/13/2014	James Holsinger/218-2058/jwh.uky.edu	

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ⁶
Undergraduate Council			
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

⁶ Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.