RECEIVED

UNIVERSITY OF KENTUCKY APPLICATION TO DROP A COURSE

MAR 2 6 2007

	Submitted by College of Fine Arts	Date	January SEN	TIE C	OUN(
	Department/Division offering course				_	
	Prefix and Number TA 264 Title Make-up for the Theatre		Credits	_3		
	Effective Date Fall 2007 (semeste	r & year)				
	Why is the course to be dropped?					
	The Content no longer warrants a full 3 credit hour course and future make-up content will be covered in other courses.					
_	(Namely TA 115 and TA 215					
_			·			
	Will dropping this course change the degree requirements in one or more programs? If yes, explain the change(s) below. (NOTE – If "yes," a program change must be submit	tted.)	X Yes		No	
	Under the current B.A. in Theatre Degree, the course is required, but in the B.A. Theatre Degree (proposed Spring 2007) the					
	content of the course will be covered in other courses and is no longer required.					
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-						
	Has the course been taken by a significant number of students in other departments/college	-	☐ Yes	X	No	
	a. If yes, list the college(s) or department(s) from which student enrollment in this co	ourse has cor	ne, if known.			
,	b. What provision has been made for meeting the needs of these students?					
	o. What provision has been made for meeting the needs of these students?					
					,	
	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 consulted.	has been				
1	Is this course currently included in the Hairmanity Co. disc Day 2000					
J	Is this course currently included in the University Studies Program?		∐ Yes	X	No	
,	Within the Department, who should be contacted for further information about this proposal?					
-	Tony Hardin	7-925	50			
	Name		Phone Extens	ion		

Signatures of Approval:	10/1/2000			
Department Chair	7 8 0 Pate			
Dean of the College	Date of Notice to the Faculty			
*Undergraduate Council	3/20/2017 Date			
*University Studies	Date			
*Graduate Council	Date			
Academic Council for the Medical Center	Date			
Senate Council	Date of Notice to University Senate			
*If applicable, as provided by the Rules of the University Senate				

ACTION OTHER THAN APPROVAL