

**PURDUE UNIVERSITY**  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

Print Form

EFD 15-10

DEPARTMENT School of Electrical and Computer Engineering (EFD 15-10) EFFECTIVE SESSION Summer 2010

SP 2011

**INSTRUCTIONS:** Please check the items below which describe the purpose of this request.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> 1. New course with supporting documents | <input type="checkbox"/> 7. Change in course attributes (department head signature only)  |
| <input type="checkbox"/> 2. Add existing course offered at another campus   | <input type="checkbox"/> 8. Change in instructional hours                                 |
| <input type="checkbox"/> 3. Expiration of a course                          | <input type="checkbox"/> 9. Change in course description                                  |
| <input type="checkbox"/> 4. Change in course number                         | <input type="checkbox"/> 10. Change in course requisites                                  |
| <input type="checkbox"/> 5. Change in course title                          | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type                    | <input type="checkbox"/> 12. Transfer from one department to another                      |

**PROPOSED:**

**EXISTING:**

**TERMS OFFERED**

Check All That Apply:

Subject Abbreviation ECE Subject Abbreviation \_\_\_\_\_  
 Course Number 29199 Course Number \_\_\_\_\_  
 Long Title Professional Practice - ~~5-Session~~ Co-Op I  
 Short Title Prof Practice, Extensive

Summer  Fall  Spring

**CAMPUS(ES) INVOLVED**

- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> Calumet      | <input type="checkbox"/> N. Central              |
| <input type="checkbox"/> Cont Ed      | <input type="checkbox"/> Tech Statewide          |
| <input type="checkbox"/> Ft. Wayne    | <input checked="" type="checkbox"/> W. Lafayette |
| <input type="checkbox"/> Indianapolis |  |

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

**CREDIT TYPE**

1. Fixed Credit: Cr. Hrs. 0  
 2. Variable Credit Range:  
 Minimum Cr. Hrs \_\_\_\_\_  
 (Check One) To  Or   
 Maximum Cr. Hrs. \_\_\_\_\_  
 3. Equivalent Credit: Yes  No

**COURSE ATTRIBUTES: Check All That Apply**

- |   |  |
|---|--|
| <input type="checkbox"/> 1. Pass/Not Pass Only                          | <input type="checkbox"/> 6. Registration Approval Type                             |
| <input checked="" type="checkbox"/> 2. Satisfactory/Unsatisfactory Only | Department <input checked="" type="checkbox"/> Instructor <input type="checkbox"/> |
| <input type="checkbox"/> 3. Repeatable                                  | 7. Variable Title <input type="checkbox"/>   |
| Maximum Repeatable Credit: _____  | 8. Honors <input type="checkbox"/>   |
| <input type="checkbox"/> 4. Credit by Examination                       | 9. Full Time Privilege <input checked="" type="checkbox"/>                         |
| <input checked="" type="checkbox"/> 5. Special Fees                     | 10. Off Campus Experience <input checked="" type="checkbox"/>                      |

Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
Lecture				
Recitation				
Presentation				
Laboratory				
Lab Prep				
Studio				
Distance				
Clinic				
Experiential	X			
Research				
Ind. Study				
Pract/Observ				

**Cross-Listed Courses**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**

Restrictions: Must be enrolled in the School of Electrical and Computer Engineering  
 Prerequisites: Sophomore standing or consent of instructor  
 Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____
Fort Wayne Department Head _____ Date _____	Fort Wayne School Dean _____ Date _____
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____
North Central Department Head _____ Date _____	North Central Chancellor _____ Date _____
West Lafayette Department Head <u>W. L.</u> <u>10/26/09</u>	West Lafayette College School Dean <u>Michael J. Harris</u> <u>10/26/09</u>
	West Lafayette Registrar <u>Denise Schaffer</u> <u>11/10</u>

10/26/09



PURDUE UNIVERSITY  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

EFD 15-10

DEPARTMENT School of Electrical and Computer Engineering (EFD 15-10) EFFECTIVE SESSION Summer 2010

SP 2011

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- 1. New course with supporting documents
- 2. Add existing course offered at another campus
- 3. Expiration of a course
- 4. Change in course number
- 5. Change in course title
- 6. Change in course credit/type
- 7. Change in course attributes (department head signature only)
- 8. Change in instructional hours
- 9. Change in course description
- 10. Change in course requisites
- 11. Change in semesters offered (department head signature only)
- 12. Transfer from one department to another

<b>PROPOSED:</b> Subject Abbreviation <u>ECE</u> Course Number <u>29299</u> Long Title <u>Professional Practice <sup>Extensive</sup> 5-Session Co-Op II</u> Short Title <u>Prof Practice <sup>Extensive</sup> II</u>	<b>EXISTING:</b> Subject Abbreviation _____ Course Number _____	<b>TERMS OFFERED</b> Check All That Apply: <input checked="" type="checkbox"/> Summer <input checked="" type="checkbox"/> Fall <input checked="" type="checkbox"/> Spring  <b>CAMPUS(ES) INVOLVED</b> <input type="checkbox"/> Calumet <input type="checkbox"/> N. Central <input type="checkbox"/> Cont Ed <input type="checkbox"/> Tech Statewide <input type="checkbox"/> Ft. Wayne <input checked="" type="checkbox"/> W. Lafayette <input type="checkbox"/> Indianapolis
--	---	---

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

<b>CREDIT TYPE</b> 1. Fixed Credit: Cr. Hrs. <u>0</u> 2. Variable Credit Range: Minimum Cr. Hrs. _____ (Check One) To _____ Or _____ Maximum Cr. Hrs. _____ 3. Equivalent Credit: Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>COURSE ATTRIBUTES: Check All That Apply</b> 1. Pass/Not Pass Only <input type="checkbox"/> 2. Satisfactory/Unsatisfactory Only <input checked="" type="checkbox"/> 3. Repeatable <input type="checkbox"/> Maximum Repeatable Credit: _____ 4. Credit by Examination <input type="checkbox"/> 5. Special Fees <input checked="" type="checkbox"/>	6. Registration Approval Type Department <input checked="" type="checkbox"/> Instructor <input type="checkbox"/> 7. Variable Title <input type="checkbox"/> 8. Honors <input type="checkbox"/> 9. Full Time Privilege <input checked="" type="checkbox"/> 10. Off Campus Experience <input checked="" type="checkbox"/>
--	---	--

ScheduleType	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated	Cross-Listed Courses _____ _____ _____ _____ _____
Lecture	_____	_____	_____	_____	
Recitation	_____	_____	_____	_____	
resentation	_____	_____	_____	_____	
laboratory	_____	_____	_____	_____	
Lab Prep	_____	_____	_____	_____	
Studio	_____	_____	_____	_____	
Distance	_____	_____	_____	_____	
Clinic	_____	_____	_____	_____	
Experiential	<u>X</u>	_____	_____	_____	
Research	_____	_____	_____	_____	
Ind. Study	_____	_____	_____	_____	
Pract/Observ	_____	_____	_____	_____	

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**  
 Restrictions: Must be enrolled in the School of Electrical and Computer Engineering  
 Prerequisites: ECE 29199  
 Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head	Date	Calumet School Dean	Date
Fort Wayne Department Head	Date	Fort Wayne School Dean	Date
Indianapolis Department Head	Date	Indianapolis School Dean	Date
North Central Department Head	Date	North Central Chancellor	Date
West Lafayette Department Head	Date	West Lafayette College/School Dean	Date
		West Lafayette Registrar	Date

West Lafayette Registrar: [Signature] 11/7/10  
 West Lafayette Department Head: Wahr 10/26/09

10/12/10  
R



**PURDUE UNIVERSITY**  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

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EFD 15-10

SP 2011

DEPARTMENT School of Electrical and Computer Engineering (EFD 15-10) EFFECTIVE SESSION Summer 2010

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> 1. New course with supporting documents | <input type="checkbox"/> 7. Change in course attributes (department head signature only)  |
| <input type="checkbox"/> 2. Add existing course offered at another campus   | <input type="checkbox"/> 8. Change in instructional hours                                 |
| <input type="checkbox"/> 3. Expiration of a course                          | <input type="checkbox"/> 9. Change in course description                                  |
| <input type="checkbox"/> 4. Change in course number                         | <input type="checkbox"/> 10. Change in course requisites                                  |
| <input type="checkbox"/> 5. Change in course title                          | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type                    | <input type="checkbox"/> 12. Transfer from one department to another                      |

**PROPOSED:**

Subject Abbreviation ECE

Course Number 39399

Long Title Professional Practice 5-Session Co-Op III

Short Title Prof Practice <sup>EXTENSIVE</sup> III

**EXISTING:**

Subject Abbreviation \_\_\_\_\_

Course Number \_\_\_\_\_

**TERMS OFFERED**

Check All That Apply:

Summer  Fall  Spring

**CAMPUS(ES) INVOLVED**

Calumet  N. Central  
 Cont Ed  Tech Statewide  
 Ft. Wayne  W. Lafayette  
 Indianapolis

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

**CREDIT TYPE**

1. Fixed Credit: Cr. Hrs. 0
2. Variable Credit Range:  
 Minimum Cr. Hrs. \_\_\_\_\_  
 (Check One) To  Or   
 Maximum Cr. Hrs. \_\_\_\_\_
3. Equivalent Credit: Yes  No

**COURSE ATTRIBUTES: Check All That Apply**

- |   |  |
|---|--|
| <input type="checkbox"/> 1. Pass/Not Pass Only                          | <input type="checkbox"/> 6. Registration Approval Type<br>Department <input checked="" type="checkbox"/> Instructor <input type="checkbox"/> |
| <input checked="" type="checkbox"/> 2. Satisfactory/Unsatisfactory Only | <input type="checkbox"/> 7. Variable Title   |
| <input type="checkbox"/> 3. Repeatable                                  | <input type="checkbox"/> 8. Honors   |
| Maximum Repeatable Credit: _____  | <input checked="" type="checkbox"/> 9. Full Time Privilege   |
| <input type="checkbox"/> 4. Credit by Examination                       | <input checked="" type="checkbox"/> 10. Off Campus Experience  |
| <input checked="" type="checkbox"/> 5. Special Fees                     |  |

Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
Lecture				
Recitation				
Presentation				
Laboratory				
Lab Prep				
Studio				
Distance				
Clinic				
Experiential	X			
Research				
Ind. Study				
Pract/Observ				

**Cross-Listed Courses**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**

Restrictions: Must be enrolled in the School of Electrical and Computer Engineering  
 Prerequisites: ECE 29299  
 Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____
Fort Wayne Department Head _____ Date _____	Fort Wayne School Dean _____ Date _____
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____
North Central Department Head _____ Date _____	North Central Chancellor _____ Date _____
West Lafayette Department Head <u>Wah</u> <u>10/26/09</u>	West Lafayette College/School Dean _____ Date _____ West Lafayette Registrar _____ Date _____

OFFICE OF THE REGISTRAR

*10/29/10*  
*[Signature]*



**PURDUE UNIVERSITY**  
REQUEST FOR ADDITION, EXPIRATION,  
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EFD 15-10

SP 2011

DEPARTMENT School of Electrical and Computer Engineering (EFD 15-10) EFFECTIVE SESSION Summer 2010

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> 1. New course with supporting documents | <input type="checkbox"/> 7. Change in course attributes (department head signature only)  |
| <input type="checkbox"/> 2. Add existing course offered at another campus   | <input type="checkbox"/> 8. Change in instructional hours                                 |
| <input type="checkbox"/> 3. Expiration of a course                          | <input type="checkbox"/> 9. Change in course description                                  |
| <input type="checkbox"/> 4. Change in course number                         | <input type="checkbox"/> 10. Change in course requisites                                  |
| <input type="checkbox"/> 5. Change in course title                          | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type                    | <input type="checkbox"/> 12. Transfer from one department to another                      |

**PROPOSED:**

**EXISTING:**

**TERMS OFFERED**  
Check All That Apply:

Subject Abbreviation ECE Subject Abbreviation \_\_\_\_\_  
 Course Number 39499 Course Number \_\_\_\_\_  
 Long Title Professional Practice <sup>EXTENSIVE</sup> 5-Session Co-Op IV  
 Short Title Prof Practice <sup>EXTENSIVE</sup> IV

Summer  Fall  Spring

**CAMPUS(ES) INVOLVED**

Calumet  N. Central  
 Cont Ed  Tech Statewide  
 Ft. Wayne  W. Lafayette  
 Indianapolis

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

**CREDIT TYPE**

**COURSE ATTRIBUTES: Check All That Apply**

1. Fixed Credit: Cr. Hrs. 0  
 2. Variable Credit Range:  
 Minimum Cr. Hrs. \_\_\_\_\_  
 (Check One) To  Or   
 Maximum Cr. Hrs. \_\_\_\_\_  
 3. Equivalent Credit: Yes  No

1. Pass/Not Pass Only   
 2. Satisfactory/Unsatisfactory Only   
 3. Repeatable   
 Maximum Repeatable Credit:   
 4. Credit by Examination   
 5. Special Fees

6. Registration Approval Type  
 Department  Instructor   
 7. Variable Title   
 8. Honors   
 9. Full Time Privilege   
 10. Off Campus Experience

Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
Lecture	_____	_____	_____	_____
Recitation	_____	_____	_____	_____
resentation	_____	_____	_____	_____
laboratory	_____	_____	_____	_____
Lab Prep	_____	_____	_____	_____
Studio	_____	_____	_____	_____
Distance	_____	_____	_____	_____
Clinic	_____	_____	_____	_____
Experiential	<input checked="" type="checkbox"/>	_____	_____	_____
Research	_____	_____	_____	_____
Ind. Study	_____	_____	_____	_____
Pract/Observ	_____	_____	_____	_____

**Cross-Listed Courses**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**

Restrictions: Must be enrolled in the School of Electrical and Computer Engineering  
 Prerequisites: ECE 39399  
 Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____
Fort Wayne Department Head _____ Date _____	Fort Wayne School Dean _____ Date _____
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____
North Central Department Head _____ Date _____	North Central Chancellor _____ Date _____
West Lafayette Department Head _____ Date _____	West Lafayette College/School Dean _____ Date _____

*[Handwritten Signature]* \_\_\_\_\_ Date 11/2/10  
 West Lafayette Registrar

*[Handwritten Signature]*  
15149110





**PURDUE UNIVERSITY**  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

Print Form

EFD 15-10

DEPARTMENT School of Electrical and Computer Engineering (EFD 15-10) EFFECTIVE SESSION Summer 2010

SP 2011

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> 1. New course with supporting documents | <input type="checkbox"/> 7. Change in course attributes (department head signature only)  |
| <input type="checkbox"/> 2. Add existing course offered at another campus   | <input type="checkbox"/> 8. Change in instructional hours                                 |
| <input type="checkbox"/> 3. Expiration of a course                          | <input type="checkbox"/> 9. Change in course description                                  |
| <input type="checkbox"/> 4. Change in course number                         | <input type="checkbox"/> 10. Change in course requisites                                  |
| <input type="checkbox"/> 5. Change in course title                          | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type                    | <input type="checkbox"/> 12. Transfer from one department to another                      |

**PROPOSED:**

**EXISTING:**

**TERMS OFFERED**

Check All That Apply:

Subject Abbreviation ECE Subject Abbreviation \_\_\_\_\_  
 Course Number 39599 Course Number \_\_\_\_\_  
 Long Title Professional Practice 5-Session Co-Op V  
 Short Title Prof Practice Extensive p V

Summer  Fall  Spring

**CAMPUS(ES) INVOLVED**

Calumet  N. Central  
 Cont Ed  Tech Statewide  
 Ft. Wayne  W. Lafayette  
 Indianapolis

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

**CREDIT TYPE**

1. Fixed Credit: Cr. Hrs. 0  
 2. Variable Credit Range:  
 Minimum Cr. Hrs. \_\_\_\_\_  
 (Check One) To  Or   
 Maximum Cr. Hrs. \_\_\_\_\_  
 3. Equivalent Credit: Yes  No

**COURSE ATTRIBUTES: Check All That Apply**

1. Pass/Not Pass Only   
 2. Satisfactory/Unsatisfactory Only   
 3. Repeatable   
 Maximum Repeatable Credit: \_\_\_\_\_  
 4. Credit by Examination   
 5. Special Fees   
 6. Registration Approval Type  
 Department  Instructor   
 7. Variable Title   
 8. Honors   
 9. Full Time Privilege   
 10. Off Campus Experience

ScheduleType	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
Lecture	_____	_____	_____	_____
Recitation	_____	_____	_____	_____
Presentation	_____	_____	_____	_____
Laboratory	_____	_____	_____	_____
Lab Prep	_____	_____	_____	_____
Studio	_____	_____	_____	_____
Distance	_____	_____	_____	_____
Clinic	_____	_____	_____	_____
Experiential	<input checked="" type="checkbox"/>	_____	_____	_____
Research	_____	_____	_____	_____
Ind. Study	_____	_____	_____	_____
Pract/Observ	_____	_____	_____	_____

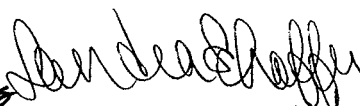
**Cross-Listed Courses**


\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**

Restrictions: Must be enrolled in the School of Electrical and Computer Engineering  
 Prerequisites: ECE 39499  
 Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____
Fort Wayne Department Head _____ Date _____	Fort Wayne School Dean _____ Date _____
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____
North Central Department Head _____ Date _____	North Central Chancellor _____ Date _____
West Lafayette Department Head _____ Date _____	West Lafayette College/School Dean _____ Date _____

  
 West Lafayette Registrar \_\_\_\_\_ Date \_\_\_\_\_

10/19/10  




PURDUE UNIVERSITY  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

EFD 15-10

SP 2011

DEPARTMENT School of Electrical and Computer Engineering (EFD 15-10) EFFECTIVE SESSION Summer 2010

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- 1. New course with supporting documents
- 2. Add existing course offered at another campus
- 3. Expiration of a course
- 4. Change in course number
- 5. Change in course title
- 6. Change in course credit/type
- 7. Change in course attributes (department head signature only)
- 8. Change in instructional hours
- 9. Change in course description
- 10. Change in course requisites
- 11. Change in semesters offered (department head signature only)
- 12. Transfer from one department to another

PROPOSED:

EXISTING:

Subject Abbreviation ECE

Subject Abbreviation \_\_\_\_\_

Course Number 29199

Course Number \_\_\_\_\_

Long Title Professional Practice 5-Session Co-Op I

Short Title Prof Practice 5-Sess Co-Op I

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

TERMS OFFERED

Check All That Apply:

Summer  Fall  Spring

CAMPUS(ES) INVOLVED

Calumet  N. Central  
 Cont Ed  Tech Statewide  
 Ft. Wayne  W. Lafayette  
 Indianapolis

CREDIT TYPE

1. Fixed Credit: Cr. Hrs.

2. Variable Credit Range:  
 Minimum Cr. Hrs.   
 (Check One) To  Or   
 Maximum Cr. Hrs.

3. Equivalent Credit: Yes  No

COURSE ATTRIBUTES: Check All That Apply

1. Pass/Not Pass Only

2. Satisfactory/Unsatisfactory Only

3. Repeatable   
 Maximum Repeatable Credit:

4. Credit by Examination

5. Special Fees

6. Registration Approval Type  
 Department  Instructor

7. Variable Title

8. Honors

9. Full Time Privilege

10. Off Campus Experience

ScheduleType	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
Lecture				
Recitation				
Presentation				
Laboratory				
Lab Prep				
Studio				
Distance				
Clinic				
Experiential	X			
Research				
Ind. Study				
Pract/Observ				

Cross-Listed Courses

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

Restrictions: Must be enrolled in the School of Electrical and Computer Engineering  
 Prerequisites: Sophomore standing or consent of instructor  
 Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head \_\_\_\_\_ Date \_\_\_\_\_ Calumet School Dean \_\_\_\_\_ Date \_\_\_\_\_

Fort Wayne Department Head \_\_\_\_\_ Date \_\_\_\_\_ Fort Wayne School Dean \_\_\_\_\_ Date \_\_\_\_\_

Indianapolis Department Head \_\_\_\_\_ Date \_\_\_\_\_ Indianapolis School Dean \_\_\_\_\_ Date \_\_\_\_\_

North Central Department Head \_\_\_\_\_ Date \_\_\_\_\_ North Central Chancellor \_\_\_\_\_ Date \_\_\_\_\_

West Lafayette Department Head W. Sch 10/26/09 West Lafayette College School Dean Michael J. Davis 10/26/09 West Lafayette Registrar \_\_\_\_\_ Date \_\_\_\_\_



PURDUE UNIVERSITY  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

Office of the Registrar  
FORM 40 REV. 7/08

EFD 15-10

SP 2011

DEPARTMENT School of Electrical and Computer Engineering (EFD 15-10) EFFECTIVE SESSION Summer 2010

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> 1. New course with supporting documents | <input type="checkbox"/> 7. Change in course attributes (department head signature only)  |
| <input type="checkbox"/> 2. Add existing course offered at another campus   | <input type="checkbox"/> 8. Change in instructional hours                                 |
| <input type="checkbox"/> 3. Expiration of a course                          | <input type="checkbox"/> 9. Change in course description                                  |
| <input type="checkbox"/> 4. Change in course number                         | <input type="checkbox"/> 10. Change in course requisites                                  |
| <input type="checkbox"/> 5. Change in course title                          | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type                    | <input type="checkbox"/> 12. Transfer from one department to another                      |

PROPOSED:

EXISTING:

Subject Abbreviation ECE Subject Abbreviation \_\_\_\_\_

Course Number 29299 Course Number \_\_\_\_\_

Long Title Professional Practice <sup>Extensive</sup> 5-Session Co-Op II

Short Title Prof Practice 5-Session Co-Op II

TERMS OFFERED  
Check All That Apply:

Summer  Fall  Spring

CAMPUS(ES) INVOLVED

Calumet  N. Central

Cont Ed  Tech Statewide

Ft. Wayne  W. Lafayette

Indianapolis

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

CREDIT TYPE

1. Fixed Credit: Cr. Hrs. 0

2. Variable Credit Range:  
Minimum Cr. Hrs. \_\_\_\_\_  
(Check One) To  Or   
Maximum Cr. Hrs. \_\_\_\_\_

3. Equivalent Credit: Yes  No

COURSE ATTRIBUTES: Check All That Apply

1. Pass/Not Pass Only

2. Satisfactory/Unsatisfactory Only

3. Repeatable   
Maximum Repeatable Credit: \_\_\_\_\_

4. Credit by Examination

5. Special Fees

6. Registration Approval Type  
Department  Instructor

7. Variable Title

8. Honors

9. Full Time Privilege

10. Off Campus Experience

Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
Lecture				
Recitation				
Representation				
Laboratory				
Lab Prep				
Studio				
Distance				
Clinic				
Experiential	X			
Research				
Ind. Study				
Pract/Observ				

Cross-Listed Courses

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

Restrictions: Must be enrolled in the School of Electrical and Computer Engineering

Prerequisites: ECE 29199

Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head \_\_\_\_\_ Date \_\_\_\_\_ Calumet School Dean \_\_\_\_\_ Date \_\_\_\_\_

Fort Wayne Department Head \_\_\_\_\_ Date \_\_\_\_\_ Fort Wayne School Dean \_\_\_\_\_ Date \_\_\_\_\_

Indianapolis Department Head \_\_\_\_\_ Date \_\_\_\_\_ Indianapolis School Dean \_\_\_\_\_ Date \_\_\_\_\_

North Central Department Head \_\_\_\_\_ Date \_\_\_\_\_ North Central Chancellor \_\_\_\_\_ Date \_\_\_\_\_

West Lafayette Department Head W. L. [Signature] 10/26/09 \_\_\_\_\_ Date \_\_\_\_\_ West Lafayette College/School Dean [Signature] \_\_\_\_\_ Date \_\_\_\_\_ West Lafayette Registrar \_\_\_\_\_ Date \_\_\_\_\_



PURDUE UNIVERSITY  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

EFD 15-10

SP 2011

DEPARTMENT School of Electrical and Computer Engineering (EFD 15-10) EFFECTIVE SESSION Summer 2010

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- 1. New course with supporting documents
- 2. Add existing course offered at another campus
- 3. Expiration of a course
- 4. Change in course number
- 5. Change in course title
- 6. Change in course credit/type
- 7. Change in course attributes (department head signature only)
- 8. Change in instructional hours
- 9. Change in course description
- 10. Change in course requisites
- 11. Change in semesters offered (department head signature only)
- 12. Transfer from one department to another

**PROPOSED:** Subject Abbreviation ECE Course Number 39399 Long Title Professional Practice ~~5-Session~~ Co-Op III Short Title Prof Practice ~~5-Session~~ Co-Op III

**EXISTING:** Subject Abbreviation \_\_\_\_\_ Course Number \_\_\_\_\_

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

**TERMS OFFERED**  
Check All That Apply:  
 Summer  Fall  Spring

**CAMPUS(ES) INVOLVED**

Calumet  N. Central  
 Cont Ed  Tech Statewide  
 Ft. Wayne  W. Lafayette  
 Indianapolis

**CREDIT TYPE**

1. Fixed Credit: Cr. Hrs. 0

2. Variable Credit Range: Minimum Cr. Hrs. \_\_\_\_\_ To \_\_\_\_\_ Or \_\_\_\_\_ Maximum Cr. Hrs. \_\_\_\_\_

3. Equivalent Credit: Yes  No

**COURSE ATTRIBUTES: Check All That Apply**

1. Pass/Not Pass Only  2. Satisfactory/Unsatisfactory Only  3. Repeatable  4. Credit by Examination  5. Special Fees

6. Registration Approval Type Department  Instructor

7. Variable Title  8. Honors  9. Full Time Privilege  10. Off Campus Experience

Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated	Cross-Listed Courses
Lecture	_____	_____	_____	_____	
Recitation	_____	_____	_____	_____	
Presentation	_____	_____	_____	_____	
Laboratory	_____	_____	_____	_____	
Lab Prep	_____	_____	_____	_____	
Studio	_____	_____	_____	_____	
Distance	_____	_____	_____	_____	
Clinic	_____	_____	_____	_____	
Experiential	<input checked="" type="checkbox"/>	_____	_____	_____	
Research	_____	_____	_____	_____	
Ind. Study	_____	_____	_____	_____	
Pract/Observ	_____	_____	_____	_____	

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**

Restrictions: Must be enrolled in the School of Electrical and Computer Engineering  
 Prerequisites: ECE 29299  
 Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____
Fort Wayne Department Head _____ Date _____	Fort Wayne School Dean _____ Date _____
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____
North Central Department Head _____ Date _____	North Central Chancellor _____ Date _____
West Lafayette Department Head <u>W. L.</u> <u>10/26/09</u>	West Lafayette College/School Dean _____ Date _____ West Lafayette Registrar _____ Date _____





PURDUE UNIVERSITY  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

EFD 15-10

DEPARTMENT School of Electrical and Computer Engineering (EFD 15-10)

EFFECTIVE SESSION Summer 2010

SP 2011

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> 1. New course with supporting documents | <input type="checkbox"/> 7. Change in course attributes (department head signature only)  |
| <input type="checkbox"/> 2. Add existing course offered at another campus   | <input type="checkbox"/> 8. Change in instructional hours                                 |
| <input type="checkbox"/> 3. Expiration of a course                          | <input type="checkbox"/> 9. Change in course description                                  |
| <input type="checkbox"/> 4. Change in course number                         | <input type="checkbox"/> 10. Change in course requisites                                  |
| <input type="checkbox"/> 5. Change in course title                          | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type                    | <input type="checkbox"/> 12. Transfer from one department to another                      |

PROPOSED:

EXISTING:

Subject Abbreviation ECE Subject Abbreviation \_\_\_\_\_  
 Course Number 39499 Course Number \_\_\_\_\_  
 Long Title Professional Practice 5-Sess Co-Op IV  
 Short Title Prof Practice 5-Sess Co-Op IV

TERMS OFFERED  
Check All That Apply:  
 Summer  Fall  Spring

CAMPUS(ES) INVOLVED  
 Calumet  N. Central  
 Cont Ed  Tech Statewide  
 Ft. Wayne  W. Lafayette  
 Indianapolis

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

CREDIT TYPE

1. Fixed Credit: Cr. Hrs. 0  
 2. Variable Credit Range:  
 Minimum Cr. Hrs. \_\_\_\_\_  
 (Check One) To  Or   
 Maximum Cr. Hrs. \_\_\_\_\_  
 3. Equivalent Credit: Yes  No

COURSE ATTRIBUTES: Check All That Apply

1. Pass/Not Pass Only   
 2. Satisfactory/Unsatisfactory Only   
 3. Repeatable   
 Maximum Repeatable Credit: \_\_\_\_\_  
 4. Credit by Examination   
 5. Special Fees   
 6. Registration Approval Type  
 Department  Instructor   
 7. Variable Title   
 8. Honors   
 9. Full Time Privilege   
 10. Off Campus Experience

ScheduleType	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
Lecture				
Recitation				
Presentation				
Laboratory				
Lab Prep				
Studio				
Distance				
Clinic				
Experiential	X			
Research				
Ind. Study				
Pract/Observ				

Cross-Listed Courses  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

Restrictions: Must be enrolled in the School of Electrical and Computer Engineering  
 Prerequisites: ECE 39399  
 Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____
Fort Wayne Department Head _____ Date _____	Fort Wayne School Dean _____ Date _____
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____
North Central Department Head _____ Date _____	North Central Chancellor _____ Date _____
West Lafayette Department Head <u>W. L. ...</u> <u>10/26/09</u> _____ Date _____	West Lafayette Registrar <u>...</u> <u>10/26/09</u> _____ Date _____



PURDUE UNIVERSITY  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

EFD 15-10

SP 2011

PARTMENT School of Electrical and Computer Engineering (EFD 15-10) EFFECTIVE SESSION Summer 2010

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> 1. New course with supporting documents | <input type="checkbox"/> 7. Change in course attributes (department head signature only)  |
| <input type="checkbox"/> 2. Add existing course offered at another campus   | <input type="checkbox"/> 8. Change in instructional hours                                 |
| <input type="checkbox"/> 3. Expiration of a course                          | <input type="checkbox"/> 9. Change in course description                                  |
| <input type="checkbox"/> 4. Change in course number                         | <input type="checkbox"/> 10. Change in course requisites                                  |
| <input type="checkbox"/> 5. Change in course title                          | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type                    | <input type="checkbox"/> 12. Transfer from one department to another                      |

**PROPOSED:** Subject Abbreviation ECE Course Number 39599 Long Title Professional Practice 5-Session Co-Op V Short Title Prof Practice 5-Session Co-Op V

**EXISTING:** Subject Abbreviation \_\_\_\_\_ Course Number \_\_\_\_\_

**TERMS OFFERED**  
Check All That Apply:  
 Summer  Fall  Spring

**CAMPUS(ES) INVOLVED**

<input type="checkbox"/> Calumet	<input type="checkbox"/> N. Central
<input type="checkbox"/> Cont Ed	<input type="checkbox"/> Tech Statewide
<input type="checkbox"/> Ft. Wayne	<input checked="" type="checkbox"/> W. Lafayette
<input type="checkbox"/> Indianapolis	

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

<b>CREDIT TYPE</b>		<b>COURSE ATTRIBUTES: Check All That Apply</b>			
1. Fixed Credit: Cr. Hrs. <u>0</u>		1. Pass/Not Pass Only <input type="checkbox"/>	6. Registration Approval Type	Department <input checked="" type="checkbox"/>	Instructor <input type="checkbox"/>
2. Variable Credit Range: Minimum Cr. Hrs. _____ (Check One) To <input type="checkbox"/> Or <input type="checkbox"/> Maximum Cr. Hrs. _____		2. Satisfactory/Unsatisfactory Only <input checked="" type="checkbox"/>	7. Variable Title <input type="checkbox"/>	8. Honors <input type="checkbox"/>	9. Full Time Privilege <input checked="" type="checkbox"/>
3. Equivalent Credit: Yes <input type="checkbox"/> No <input type="checkbox"/>		3. Repeatable <input type="checkbox"/> Maximum Repeatable Credit: _____	4. Credit by Examination <input type="checkbox"/>	10. Off Campus Experience <input checked="" type="checkbox"/>	
		5. Special Fees <input checked="" type="checkbox"/>			

ScheduleType	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated	Cross-Listed Courses
Lecture					
Recitation					
Presentation					
Laboratory					
Lab Prep					
Studio					
Distance					
Clinic					
Experiential	<input checked="" type="checkbox"/>				
Research					
Ind. Study					
Pract/Observ					

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**  
Restrictions: Must be enrolled in the School of Electrical and Computer Engineering  
Prerequisites: ECE 39499  
Description: To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____
Fort Wayne Department Head _____ Date _____	Fort Wayne School Dean _____ Date _____
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____
North Central Department Head _____ Date _____	North Central Chancellor _____ Date _____
West Lafayette Department Head <u>W. L. [Signature]</u> <u>10/26/09</u> Date _____	West Lafayette College/School Dean _____ Date _____ West Lafayette Registrar _____ Date _____



**TO:** The Faculty of the College of Engineering

**FROM:** The Faculty of the School of Electrical and Computer Engineering

**RE:** New Undergraduate Courses: ECE 29199, 29299, 39399, 39499 and 39599

The faculty of the School of Electrical and Computer Engineering has approved the following new courses. This action is now submitted to the Engineering Faculty with a recommendation for approval.

- ECE 29199 Professional Practice <sup>Extensive</sup> ~~5-Session~~ Co-Op I  
Sem. 1, 2, or SS, cr. 0.  
**Restrictions:** Must be enrolled in the School of Electrical and Computer Engineering. Sophomore standing  
**Prerequisites:** None  
**Attributes:** Department Approval  
**Description:** To obtain professional practice with qualified employers within industry, government, or small business.
- ECE 29299 Professional Practice <sup>Extensive</sup> ~~5-Session~~ Co-Op II  
Sem. 1, 2, or SS, cr. 0.  
**Restrictions:** Must be enrolled in the School of Electrical and Computer Engineering.  
**Prerequisites:** ECE 29199  
**Attributes:** Department Approval  
**Description:** To obtain professional practice with qualified employers within industry, government, or small business.
- ECE 39399 Professional Practice <sup>Extensive</sup> ~~5-Session~~ Co-Op III  
Sem. 1, 2, or SS, cr. 0.  
**Restrictions:** Must be enrolled in the School of Electrical and Computer Engineering.  
**Prerequisites:** ECE 29299  
**Attributes:** Department Approval  
**Description:** To obtain professional practice with qualified employers within industry, government, or small business.



- ECE 39499 Professional Practice <sup>Extensive</sup> ~~5-Session~~ Co-Op IV  
Sem. 1, 2, or SS, cr. 0.  
**Restrictions:** Must be enrolled in the School of Electrical and Computer Engineering.  
**Prerequisites:** ECE 39399  
**Attributes:** Department Approval  
**Description:** To obtain professional practice with qualified employers within industry, government, or small business.
- ECE 39599 Professional Practice <sup>Extensive</sup> ~~5-Session~~ Co-Op V  
Sem. 1, 2, or SS, cr. 0.  
**Restrictions:** Must be enrolled in the School of Electrical and Computer Engineering.  
**Prerequisites:** ECE 39499  
**Attributes:** Department Approval  
**Description:** To obtain professional practice with qualified employers within industry, government, or small business.

**Reason:** To maintain consistent course numbers and titles for Professional Practice courses throughout all disciplines participating in the Professional Practice Programs.



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V. Balakrishnan, Interim Head  
School of Electrical and Computer Engineering

APPROVED FOR THE FACULTY  
OF THE SCHOOLS OF ENGINEERING  
BY THE ENGINEERING  
CURRICULUM COMMITTEE

ECC Minutes #10  
Date 12/7/09  
Chairman ECC R. Cijra

