

PURDUE UNIVERSITY
REQUEST FOR ADDITION, DELETION,
OR REVISION OF A COURSE

SCHOOL DOCUMENT NO. 27-02

GRADUATE COUNCIL DOCUMENT NO. 03-15c
Spring 2004

DEPARTMENT **Materials Engineering**

DATE SUBMITTED **3/28/03**

DATE EFFECTIVE **Fall 2003**

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

PURPOSE

- | | |
|---|---|
| <input type="checkbox"/> 1. Deletion of a course | <input type="checkbox"/> 8. Change in semesters offered |
| <input type="checkbox"/> 2. New course with supporting documents | <input type="checkbox"/> 9. Change in course credit/type |
| <input type="checkbox"/> 3. Add existing course offered at another campus | <input type="checkbox"/> 10. Change in course attributes |
| <input type="checkbox"/> 4. Change in course number at same level | <input type="checkbox"/> 11. Change in instructional hours |
| <input type="checkbox"/> 5. Downgrading of course level | <input type="checkbox"/> 12. Change in prerequisites |
| <input type="checkbox"/> 6. Upgrading of course level | <input type="checkbox"/> 13. Change in description of course content |
| <input type="checkbox"/> 7. Change in course title | <input type="checkbox"/> 14. Transfer of course from one dept. to another |

EXISTING:

PROPOSED:

SEMESTERS OFFERED

Subject Abbreviation _____
Course Number _____

Subject Abbreviation **MSE**
Course Number **582**

Check All That Apply.

Summer Fall Ag Winter Spring

Proposed Title **Transmission Electron Microscopy Skills**

Variable Title Yes No

Abbreviated Title **TEM Skills**

Abbreviated title will be entered by the Office of the Registrar if omitted. (22 CHARACTERS ONLY)

CROSS LISTED COURSES

CREDIT TYPE

1. Fixed Credit: Cr. Hrs. **1**
2. Variable Credit Range:
Minimum Cr. Hrs _____
(Check One) To _____ Or _____
Maximum Cr. Hrs _____
3. Equivalent Credit: Yes No
4. Thesis Credit: Yes No

COURSE ATTRIBUTES: Check All That Apply.

1. Pass/Not Pass Only
2. Repeatable for Credit
3. Available for Credit by Examination
4. Designator Required
5. Special Fees
6. Approval Required for Enrollment
Department _____
Instructor _____

Instructional Type	Class Hours	FTE	Instructional Type	Class Hours	FTE	Instructional Type	Class Hours	FTE
Primary	3		Auto-tutorial			Thesis		
Secondary			Ind. Study			Observation		
Laboratory	3		Clinic			Malls Based		
Lab. Prep.			Experiential					

CAMPUS(ES) INVOLVED

Calumet
Fort Wayne
Indianapolis
North Central
West Lafayette
Off Campus

and Offered as

COURSE DESCRIPTION (PREREQUISITES INCLUDED):

Sem. 1. 2. Class 3, lab 3, (weeks 6-10) cr. 1. ~~Available pass/not-pass only~~ Prerequisites: Admission by consent of instructor.

Principal components and operation of the transmission electron microscope (TEM). Limits to resolution; imaging and diffraction modes; interpretation of results. Laboratory sessions will emphasize the practical operation of the instrument and culminate in a test of student skills. This course must be completed before undertaking any TEM research in the School of Materials Engineering. Professors King and Kvam.

Calumet Undergrad Curriculum Committee _____ Date _____	Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____
Fort Wayne Department Head _____ Date _____	Fort Wayne School Dean _____ Date _____	Fort Wayne Chancellor <i>Michael W. Zoltowski</i> #972 Date _____ M.D., Zoltowski, Chair 4/5/03
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____	Undergrad Curriculum Committee _____ Date _____
North Central Department Head _____ Date _____	North Central Vice Chancellor _____ Date _____	APPROVED 10/16/03 Date Approved by Graduate Council _____
<i>Alexander</i> 3/3/03 West Lafayette Department Head _____ Date _____	<i>J. King</i> 4/9/03 West Lafayette School Dean _____ Date _____	<i>Marilyn D. Hunt</i> 1/7/04 Graduate Council Secretary _____ Date _____
<i>Tam</i> 10-16-03 Graduate Area Committee Convener _____ Date _____	Graduate Dean _____ Date _____	<i>Debra Sheets</i> 1/18/04 West Lafayette Registrar _____ Date _____

