

DEPARTMENT Industrial Engineering

DATE SUBMITTED 03/03/03

DATE EFFECTIVE 12/10/02

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

PURPOSE

- |   |   |
|---|---|
| <input checked="" 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:

Subject Abbreviation IE  
Course Number 190

PROPOSED:

Subject Abbreviation  
Course Number

SEMESTERS OFFERED

Check All That Apply.  
Summer Fall Ag Winter Spring

Proposed Title

Variable Title Yes No

Abbreviated Title INTRO INDUSTRIAL ENGR

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. |    |
| 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                             |

|                           |                    |            |
|---------------------------|--------------------|------------|
| <u>Instructional Type</u> | <u>Class Hours</u> | <u>FTE</u> |
| Primary                   |                    |            |
| Secondary                 |                    |            |
| Laboratory                |                    |            |
| Lab. Prep.                |                    |            |

|                           |                    |            |
|---------------------------|--------------------|------------|
| <u>Instructional Type</u> | <u>Class Hours</u> | <u>FTE</u> |
| Auto-tutorial             |                    |            |
| Ind. Study                |                    |            |
| Clinic                    |                    |            |
| Experiential              |                    |            |

|                           |                    |            |
|---------------------------|--------------------|------------|
| <u>Instructional Type</u> | <u>Class Hours</u> | <u>FTE</u> |
| Thesis                    |                    |            |
| Observation               |                    |            |
| Matls Based               |                    |            |

CAMPUS(ES) INVOLVED

Calumet  
Fort Wayne  
Indianapolis  
North Central  
West Lafayette  
Off Campus

COURSE DESCRIPTION (PREREQUISITES INCLUDED):

|  |      |                               |      |  |         |
|--|------|-------------------------------|------|--|---------|
| 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<br><i>Michael J. Zoltowski</i> | Date    |
| Indianapolis Department Head           | Date | Indianapolis School Dean      | Date | Apr. for Faculty #970<br>M.D. Zoltowski, Chair       | 3/11/03 |
| North Central Department Head          | Date | North Central Vice Chancellor | Date | Undergrad Curriculum Committee                       | Date    |
| West Lafayette Department Head         | Date | West Lafayette School Dean    | Date | Date Approved by Graduate Council                    |         |
| Graduate Area Committee Convener       | Date | Graduate Dean                 | Date | Graduate Council Secretary                           | Date    |
|  |      |                               |      | <i>Debra Shultz</i>                                  | 3/19/03 |
|  |      |                               |      | West Lafayette Registrar                             | Date    |



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| 3. Add existing course offered at another campus | 10. Change in course attributes                  |
| 4. Change in course number at same level         | 11. Change in instructional hours                |
| 5. Downgrading of course level                   | 12. Change in prerequisites                      |
| 6. Upgrading of course level                     | 13. Change in description of course content      |
| 7. Change in course title                        | 14. Transfer of course from one dept. to another |

EXISTING:

PROPOSED:

SEMESTERS OFFERED

Subject Abbreviation IE  
Course Number 270

Subject Abbreviation \_\_\_\_\_  
Course Number \_\_\_\_\_

Check All That Apply.  
Summer Fall Ag Winter Spring

Proposed Title \_\_\_\_\_  
Variable Title Yes No

Abbreviated Title MFG MATS AND PROCESSES

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. \_\_\_\_\_
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            |             |     | Auto-tutorial      |             |     | Thesis             |             |     |
| Secondary          |             |     | Ind. Study         |             |     | Observation        |             |     |
| Laboratory         |             |     | Clinic             |             |     | Mats Based         |             |     |
| Lab. Prep.         |             |     | Experiential       |             |     |                    |             |     |

CAMPUS(ES) INVOLVED

- Calumet  
Fort Wayne  
Indianapolis  
North Central  
West Lafayette  
Off Campus

COURSE DESCRIPTION (PREREQUISITES INCLUDED):

|  |      |                               |      |  |      |
|--|------|-------------------------------|------|--|------|
| 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<br><i>Michael Joltowski</i><br>Apr. for Faculty #970<br>M.D.Zoltowski, Chair 3/11/03 | Date |
| Indianapolis Department Head           | Date | Indianapolis School Dean      | Date | Undergrad Curriculum Committee   | Date |
| North Central Department Head          | Date | North Central Vice Chancellor | Date | Date Approved by Graduate Council  |      |
| <i>Debra E.</i> 3/4/03                 |      | <i>L. J. Huggins</i> 3/5/03   |      | Graduate Council Secretary<br><i>Debra Sheets</i> 3/19/03  | Date |
| West Lafayette Department Head         | Date | West Lafayette School Dean    | Date | West Lafayette Registrar   | Date |
| Graduate Area Committee Convener       | Date | Graduate Dean                 | Date |  |      |



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

DEPARTMENT Industrial Engineering

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|--|--|
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| 6. Upgrading of course level                     | 13. Change in description of course content      |
| 7. Change in course title                        | 14. Transfer of course from one dept. to another |

EXISTING:

PROPOSED:

SEMESTERS OFFERED

Subject Abbreviation IE  
Course Number 366

Subject Abbreviation \_\_\_\_\_  
Course Number \_\_\_\_\_

Check All That Apply.  
Summer    Fall    Ag Winter    Spring

Proposed Title \_\_\_\_\_  
Variable Title Yes \_\_\_\_\_ No \_\_\_\_\_

Abbreviated Title ELEM OF PROD MGMT

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

CROSS LISTED COURSES

CREDIT TYPE

- Fixed Credit: \_\_\_\_\_ Cr. Hrs.
- Variable Credit Range:  
Minimum Cr. Hrs \_\_\_\_\_  
(Check One) To \_\_\_\_\_ Or \_\_\_\_\_  
Maximum Cr. Hrs \_\_\_\_\_
- Equivalent Credit: Yes \_\_\_\_\_ No \_\_\_\_\_
- Thesis Credit: Yes \_\_\_\_\_ No \_\_\_\_\_

COURSE ATTRIBUTES: Check All That Apply.

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- Repeatable for Credit
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- Designator Required
- Special Fees
- Approval Required for Enrollment

Department \_\_\_\_\_  
Instructor \_\_\_\_\_

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

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- Calumet
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COURSE DESCRIPTION (PREREQUISITES INCLUDED):

|  |      |                               |      |                                     |         |
|--|------|-------------------------------|------|-------------------------------------|---------|
| Calumet Undergrad Curriculum Committee | Date | Calumet Department Head       | Date | Calumet School Dean                 | Date    |
| Fort Wayne Department Head             | Date | Fort Wayne School Dean        | Date | <i>Michael J. Zoltowski</i> 3/11/03 | Date    |
| Indianapolis Department Head           | Date | Indianapolis School Dean      | Date | Apr. for Faculty #970               | Date    |
| North Central Department Head          | Date | North Central Vice Chancellor | Date | M.D. Zoltowski, Chair               | 3/11/03 |
| West Lafayette Department Head         | Date | West Lafayette School Dean    | Date | Undergrad Curriculum Committee      | Date    |
| Graduate Area Committee Convener       | Date | Graduate Dean                 | Date | Date Approved by Graduate Council   |         |
|  |      |                               |      | Graduate Council Secretary          | Date    |
|  |      |                               |      | <i>Debra Sheets</i> 3/19/03         | Date    |
|  |      |                               |      | West Lafayette Registrar            | Date    |

