

DEPARTMENT Freshman Engineering

DATE SUBMITTED 3/31/03

DATE EFFECTIVE Fall '03

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

PURPOSE

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> 1. Deletion of a course</li> <li><input type="checkbox"/> 2. New course with supporting documents</li> <li><input type="checkbox"/> 3. Add existing course offered at another campus</li> <li><input type="checkbox"/> 4. Change in course number at same level</li> <li><input type="checkbox"/> 5. Downgrading of course level</li> <li><input type="checkbox"/> 6. Upgrading of course level</li> <li><input type="checkbox"/> 7. Change in course title</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> 8. Change in semesters offered</li> <li><input type="checkbox"/> 9. Change in course credit/type</li> <li><input type="checkbox"/> 10. Change in course attributes</li> <li><input type="checkbox"/> 11. Change in instructional hours</li> <li><input type="checkbox"/> 12. Change in prerequisites</li> <li><input type="checkbox"/> 13. Change in description of course content</li> <li><input type="checkbox"/> 14. Transfer of course from one dept. to another</li> </ul> |
|---|--|

EXISTING:

Subject Abbreviation ENGR  
Course Number 196

PROPOSED:

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

SEMESTERS OFFERED

Check All That Apply.

Summer  Fall  Ag Winter  Spring

Proposed Title Professional Internship I

Variable Title Yes  No

Abbreviated Title Prof Internshp I

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. 0
- 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	CAMPUS(ES) INVOLVED
Primary	0		Auto-tutorial			Thesis			Calumet <input type="checkbox"/>
Secondary			Ind. Study			Observation			Fort Wayne <input type="checkbox"/>
Laboratory			Clinic			Matis Based			Indianapolis <input type="checkbox"/>
Lab. Prep.			Experiential						North Central <input type="checkbox"/>
									West Lafayette <input checked="" type="checkbox"/>
									Off Campus <input type="checkbox"/>

COURSE DESCRIPTION (PREREQUISITES INCLUDED):

Prerequisites: approval by the student's academic advisor and professional practice administrator. (May be repeated.)

Professional experience in engineering. Program coordinated by department with cooperation of participating employers. Students submit a summary report.

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 J. Zoltowski</i> Apr. for Faculty #972 M.D. Zoltowski, Chair 4/29/03	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>Jennifer S. Curtis</i> 3/25/03	Date	<i>A.J. Nuzzi</i> 4/24/03	Date	Graduate Council Secretary <i>Debra Sheets</i>	Date
West Lafayette Department Head	Date	West Lafayette School Dean	Date	West Lafayette Registrar	Date
Graduate Area Committee Convener	Date	Graduate Dean	Date	West Lafayette Registrar	Date

OFFICE OF THE REGISTRAR

MAY 19 2003

Project Name: \_\_\_\_\_  
Client: \_\_\_\_\_  
Address: \_\_\_\_\_

Contract No.: \_\_\_\_\_  
Drawing No.: \_\_\_\_\_  
Revision: \_\_\_\_\_

Author: \_\_\_\_\_  
Checked: \_\_\_\_\_  
Date: \_\_\_\_\_

Scale: \_\_\_\_\_  
Notes: \_\_\_\_\_

Project Location: \_\_\_\_\_  
Site Area: \_\_\_\_\_

Project Description: \_\_\_\_\_

Project Status: \_\_\_\_\_

Project Manager: \_\_\_\_\_

Project Engineer: \_\_\_\_\_

Project Start Date: \_\_\_\_\_

Project End Date: \_\_\_\_\_

Project Budget: \_\_\_\_\_

