

PURDUE UNIVERSITY
REQUEST FOR ADDITION, EXPIRATION,
OR REVISION OF AN UNDERGRADUATE COURSE
(100-400 LEVEL)

EFD 4-09

DEPARTMENT Mechanical Engineering EFFECTIVE SESSION Fall 2009

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

- | | | | |
|-------------------------------------|--|--------------------------|--|
| <input type="checkbox"/> | 1. New course with supporting documents | <input type="checkbox"/> | 7. Change in course attributes (department head signature only) |
| <input checked="" 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 <u>ME</u> Course Number <u>29600</u> Long Title _____ Short Title _____		EXISTING: Subject Abbreviation _____ Course Number _____		TERMS OFFERED Check All That Apply: <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> 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. (22 CHARACTERS ONLY)

CREDIT TYPE 1. Fixed Credit: Cr. Hrs. <u>0</u> 2. Variable Credit Range: Minimum Cr. Hrs _____ (Check One) To <input type="checkbox"/> Or <input type="checkbox"/> Maximum Cr. Hrs _____ 3. Equivalent Credit: Yes <input type="checkbox"/> No <input type="checkbox"/> 4. Thesis Credit: Yes <input type="checkbox"/> No <input type="checkbox"/>		COURSE ATTRIBUTES: Check All That Apply 1. Pass/Not Pass Only <input type="checkbox"/> 2. Satisfactory/Unsatisfactory Only <input type="checkbox"/> 3. Repeatable <input type="checkbox"/> Maximum Repeatable Credit: <input type="checkbox"/> 4. Credit by Examination <input type="checkbox"/> 5. Designator Required <input type="checkbox"/> 6. Special Fees <input type="checkbox"/> 7. Registration Approval Type Department <input type="checkbox"/> Instructor <input type="checkbox"/> 8. Variable Title <input type="checkbox"/> 9. Remedial <input type="checkbox"/> 10. Honors <input type="checkbox"/> 11. Full Time Privilege <input type="checkbox"/> 12. Off Campus Experience <input type="checkbox"/>			
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Instructional Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated	Delivery Method (Asyn. Or Syn.)	Delivery Medium (Audio, Internet, Live, Text-Based, Video)	Cross-Listed Courses
Lecture							
Recitation							
Presentation							
Laboratory							
Studio							
Distance							
Clinic							
Experiential							
Research							
Ind. Study							
Pract/Observ							

COURSE DESCRIPTION (INCLUDE REQUISITES):

Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____	Fort Wayne Chancellor _____ Date _____
Fort Wayne Department Head _____ Date _____	Fort Wayne School Dean _____ Date _____	<i>R. Cipra</i> 3/25/2009 Undergrad Curriculum Committee _____ Date _____
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____	Date Approved by Graduate Council _____
North Central Department Head _____ Date _____	North Central Chancellor _____ Date _____	Graduate Council Secretary _____ Date _____
<i>Russ D. Jones</i> 2/15/2008 West Lafayette Department Head _____ Date _____	<i>Michael J. Davis</i> 5/24/09 West Lafayette College/School Dean _____ Date _____	<i>Sandra Schaffer</i> 5/3/09 West Lafayette Registrar _____ Date _____

5/29/09
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Workshop							
Studio							
Distance							
Clinic							
Experiential							
Research							
Ind. Study							
Pract/Observ							

COURSE DESCRIPTION (INCLUDE REQUISITES):

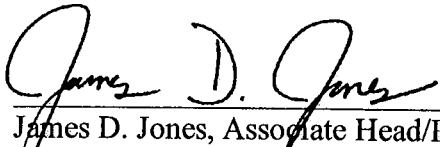
Calumet Department Head _____ Date _____	Calumet School Dean _____ Date _____	Fort Wayne Chancellor _____ Date _____
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Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____	Date Approved by Graduate Council _____
North Central Department Head _____ Date _____	North Central Chancellor _____ Date _____	Graduate Council Secretary _____ Date _____
<u>James D. Jones</u> 2/15/2008 West Lafayette Department Head _____ Date _____	<u>Michael P. Davis</u> 5/24/2008 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 Mechanical Engineering
DATE: August 6, 2008
RE: Deletion of ME 29600

The faculty of the School of Mechanical Engineering has approved the deletion of the following course. This action is now submitted to the Engineering Faculty with a recommendation for approval.

ME 29600 Professional Internship I
Sem. 1, 2, SS, Cr. 0

Reason: Course no longer needed.



James D. Jones, Associate Head/Professor
Mechanical Engineering

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

ECC Minutes 2/25/09 #19

Date 2/25/09

Chairman ECC R. Cjira

