

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

43-04

DEPARTMENT Biomedical Engineering

EFFECTIVE SESSION Spring 2005

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

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

PROPOSED:

Subject Abbreviation **BME**
Course Number **498**

EXISTING:

Subject Abbreviation
Course Number

TERMS OFFERED
Check All That Apply:
Summer Fall Spring

Long Title **Biomedical Engineering Projects**

Short Title **BME Projects**

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

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

<p>CREDIT TYPE</p> <p>1. Fixed Credit: Cr. Hrs.</p> <p>2. Variable Credit Range: Minimum Cr. Hrs <u>1</u> (Check One) To <input checked="" type="checkbox"/> Or <u>4</u> Maximum Cr. Hrs</p> <p>3. Equivalent Credit: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>4. Thesis Credit: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>	<p>COURSE ATTRIBUTES: Check All That Apply.</p> <p>1. Pass/Not Pass Only</p> <p>2. Satisfactory/Unsatisfactory Only</p> <p>3. Repeatable <input checked="" type="checkbox"/> Maximum repeatable credit:</p> <p>4. Credit by Examination <input checked="" type="checkbox"/></p> <p>5. Designator Required <input checked="" type="checkbox"/></p> <p>6. Special Fees</p>	<p>7. Registration Approval Type Department <input type="checkbox"/> Instructor <input checked="" type="checkbox"/></p> <p>8. Variable Title <input checked="" type="checkbox"/></p> <p>9. Remedial</p> <p>10. Honors</p> <p>11. Full Time Privilege</p> <p>12. Off Campus Experience</p>
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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)
Lecture						
Recitation						
Presentation						
Laboratory						
Lab Prep						
Studio						
Distance						
Clinic						
Experiential						
Research						
Ind. Study						
Pract/Observ						

COURSE DESCRIPTION (INCLUDE REQUISITES):

Individual research projects to be approved by the supervising faculty member before registering for the course. An approved written report is required.

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	Date
Indianapolis Department Head	Date	Indianapolis School Dean	Date	Undergrad Curriculum Committee	Date
North Central Department Head	Date	North Central Chancellor	Date	Date Approved by Graduate Council	
West Lafayette Department Head	Date	West Lafayette School Dean	Date	Graduate Council Secretary	Date
Graduate Area Committee Convener	Date	Graduate Dean	Date	West Lafayette Registrar	Date

[Signatures and Dates]
 11/16/05
 2/3/06

RECEIVED
FEB 9 2006
ENGINEERING
ADMINISTRATION