**DEPARTMENT**: Biomedical Engineering  
**EFFECTIVE SESSION**: Spring 2005  

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

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

**PROPOSED:**
- Subject Abbreviation: BME
- Course Number: 498
- 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)

**EXISTING:**
- Subject Abbreviation: BME
- Course Number: 498

**TERMS OFFERED**
- Check All That Apply:  
  - Summer ✓  
  - Fall ✓  
  - Spring ✓

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

**CREDIT TYPE**
1. Fixed Credit: Cr. Hrs.  
2. Variable Credit Range:  
   - Minimum Cr. Hrs: 3  
   - Maximum Cr. Hrs: 4  
3. Equivalent Credit: Yes ✓ No  
4. Thesis Credit: Yes ✓ No  

**COURSE ATTRIBUTES**
- Pass/Not Pass Only ✓  
- Satisfactory/Unsatisfactory Only ✓  
- Repeatable ✓  
- Maximum repeatable credit:  
- Credit by Examination ✓  
- Designator Required ✓  
- Special Fees ✓  
- Registration Approval Type
  - Department: Instructor ✓  
  - Variable Title  
  - Remedial  
  - Honors  
  - Full Time Privilege  
  - Off Campus Experience

**INSTRUCTIONAL TYPE**
- Lecture ✓  
- Lab Prep  
- Studio  
- Clinic  
- Experimental Research  
- Ind. Study  
- Pract/Observ

**MINUTES**
- Per Mtg:
- Meetings Per Week
- Weeks Offered
- % of Credit Allocated

**DELIVERY METHOD**
- Asyn. Or Syn.  
- Live, Text-Based, Video

**DELIVERY MEDIUM**
- Audio, Internet

**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.

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**Calumet Undergrad Curriculum Committee**  
**Date**

**Fort Wayne Department Head**  
**Date**

**Indianapolis Department Head**  
**Date**

**North Central Department Head**  
**Date**

**Graduate Area Committee Co-Chair**  
**Date**

**Calumet Department Head**  
**Date**

**Fort Wayne School Dean**  
**Date**

**Indianapolis School Dean**  
**Date**

**North Central Chancellor**  
**Date**

**West Lafayette School Dean**  
**Date**

**Calumet School Dean**  
**Date**

**Fort Wayne Chancellor**  
**Date**

**Indianapolis Chancellor**  
**Date**

**North Central Chancellor**  
**Date**

**West Lafayette Registrar**  
**Date**

**OFFICE OF THE REGISTRAR**