

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

**BFD 50-02**

SCHOOL DOCUMENT NO. XI-02/03

GRADUATE COUNCIL DOCUMENT NO. \_\_\_\_\_

DEPARTMENT Agricultural and Biological Engineering

DATE SUBMITTED 11-06-03

DATE EFFECTIVE Spr. 2004

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

**PURPOSE**

<input 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 checked="" type="checkbox"/> 12. Change in prerequisites
<input type="checkbox"/> 6. Upgrading of course level	<input checked="" type="checkbox"/> 13. Change in description of course content
<input checked="" type="checkbox"/> 7. Change in course title	<input type="checkbox"/> 14. Transfer of course from one dept. to another

<b>EXISTING:</b>	<b>PROPOSED:</b>	<b>SEMESTERS OFFERED</b>
Subject Abbreviation <u>ABE</u>	Subject Abbreviation _____	Check All That Apply. Summer <input type="checkbox"/> Fall <input type="checkbox"/> Ag Winter <input type="checkbox"/> Spring <input checked="" type="checkbox"/>
Course Number <u>556</u>	Course Number _____	
Proposed Title <u>Biological and Food Process Design</u>	Variable Title Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Abbreviated Title <u>BIOL &amp; FOOD PRO DESIGN</u>		
Abbreviated title will be entered by the Office of the Registrar if omitted. (22 CHARACTERS ONLY)		

<b>CROSS LISTED COURSES</b>	<b>CREDIT TYPE</b>	<b>COURSE ATTRIBUTES: Check All That Apply.</b>
_____	1. Fixed Credit: Cr. Hrs. <u>4</u>	1. Pass/Not Pass Only <input type="checkbox"/>
_____	2. Variable Credit Range: Minimum Cr. Hrs _____ (Check One) To _____ Or _____ Maximum Cr. Hrs _____	2. Repeatable for Credit <input type="checkbox"/>
_____	3. Equivalent Credit: Yes <input type="checkbox"/> No <input type="checkbox"/>	3. Available for Credit by Examination <input type="checkbox"/>
_____	4. Thesis Credit: Yes <input type="checkbox"/> No <input type="checkbox"/>	4. Designator Required <input type="checkbox"/>
		5. Special Fees <input type="checkbox"/>
		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	<u>3</u>		Auto-tutorial			Thesis			Calumet <input type="checkbox"/>
Secondary			Ind. Study			Observation			Fort Wayne <input type="checkbox"/>
Laboratory	<u>3</u>		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):**

Prerequisite: ABE 555 or consent of instructor.

The course will focus on the synthesis, creation, evaluation and optimization of a preliminary process design to convert basic biological materials into a finished product. Concepts of materials and energy balances, thermodynamics, kinetics, transport phenomena of biological systems will be used to design processes to minimize energy and environmental impacts, and evaluate economic factors while maintaining product quality. Group projects, written and oral reports.

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 _____	<i>Robert Montgomery</i> 3/5/04 Undergrad Curriculum Committee _____ Date _____
North Central Department Head _____ Date _____	North Central Vice Chancellor _____ Date _____	Date Approved by Graduate Council _____
<i>James B. ...</i> 11-6-03 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 _____