**Department:** School of Electrical and Computer Engineering  
**Date Submitted:** 11/25/03  
**Date Effective:**

### Instructions
Please check the items below which describe the purpose of this request.

#### Purpose
1. Deletion of a course
2. New course with supporting documents
3. Add existing course offered at another campus
4. Change in course number at same level
5. Downgrading of course level
6. Upgrading of course level
7. Change in course title
8. Change in semesters offered
9. Change in course credit type
10. Change in course attributes
11. Change in instructional hours
12. Change in prerequisites
13. Change in description of course content
14. Transfer of course from one dept. to another

### Existing
- **Subject Abbreviation:** ECE
- **Course Number:** 398
- **Proposed Title:** Industrial Practice Seminar III
- **Variable Title:** Yes
- **Abbreviated Title:** No

### Proposed
- **Subject Abbreviation:**
- **Course Number:**

### Semesters Offered
- **Check All That Apply:**
  - Summer
  - Fall
  - Winter
  - Spring

### Cross Listed Courses

<table>
<thead>
<tr>
<th>Instructional Type</th>
<th>Class Hours</th>
<th>FTE</th>
<th>Instructional Type</th>
<th>Class Hours</th>
<th>FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary</td>
<td></td>
<td></td>
<td>Auto-tutorial</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary</td>
<td></td>
<td></td>
<td>Ind. Study</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laboratory</td>
<td></td>
<td></td>
<td>Clinic</td>
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<tr>
<td>Lab. Prep.</td>
<td></td>
<td></td>
<td>Experiential</td>
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</tr>
</tbody>
</table>

### Course Description (Prerequisites Included):

### Campus(es) Involved
- Calumet
- Fort Wayne
- Indianapolis
- North Central
- West Lafayette
- Off Campus

### Course Description

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

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

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

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

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

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

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

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

**North Central Vice Chancellor**  
**Date:**

**Graduate Council Secretary**  
**Date:**

**West Lafayette Department Head**  
**Date:**

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

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

**Approved by Graduate Council**  
**Date:**

**Office of the Registrar**