

**PURDUE UNIVERSITY**  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF AN UNDERGRADUATE COURSE  
(10000-40000 LEVEL)

Print Form

EFD 54-09

DEPARTMENT Nuclear Engineering

EFFECTIVE SESSION Fall 2009 *SPRING 2011*

**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 (department head signature only)  |
| 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 (department head signature only) |
| 6. Change in course credit/type   | 12. Transfer from one department to another                      |

<b>PROPOSED:</b>	<b>EXISTING:</b>	<b>TERMS OFFERED</b> Check All That Apply:
Subject Abbreviation NUCL	Subject Abbreviation	<input checked="" type="checkbox"/> Summer <input checked="" type="checkbox"/> Fall <input checked="" type="checkbox"/> Spring
Course Number 38199	Course Number	<b>CAMPUS(ES) INVOLVED</b>
Long Title Professional Practice 3-Session Co-Op I		Calumet N. Central Cont Ed Tech Statewide Ft. Wayne <input checked="" type="checkbox"/> W. Lafayette Indianapolis
Short Title <i>Prof Practice Co-Op I</i>		
Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)		

<b>CREDIT TYPE</b>	<b>COURSE ATTRIBUTES: Check All That Apply</b>
1. Fixed Credit: Cr. Hrs. 0	1. Pass/Not Pass Only
2. Variable Credit Range: Minimum Cr. Hrs (Check One) To Or Maximum Cr. Hrs.	2. Satisfactory/Unsatisfactory Only <input checked="" type="checkbox"/>
3. Equivalent Credit: Yes No	3. Repeatable Maximum Repeatable Credit:
	4. Credit by Examination
	5. Special Fees <input checked="" type="checkbox"/>
	6. Registration Approval Type Department <input checked="" type="checkbox"/> Instructor
	7. Variable Title
	8. Honors
	9. Full Time Privilege <input checked="" type="checkbox"/>
	10. Off Campus Experience <input checked="" type="checkbox"/>

Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated	Cross-Listed Courses
Lecture					
Recitation					
Presentation					
Laboratory					
Lab Prep					
Studio					
Distance					
Clinic					
Experiential Research <input checked="" type="checkbox"/>					
Ind. Study					
Pract/Observ					

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**  
 Restriction: Professional Practice students only  
 Prerequisite: Junior Standing or consent of instructor  
 To obtain professional practice with qualified employers within industry, government, or small business.

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 Chancellor _____ Date _____
West Lafayette Department Head <i>[Signature]</i> 4-23-09	West Lafayette College/School Dean <i>[Signature]</i> 11/2/10
	West Lafayette Registrar <i>[Signature]</i> _____ Date _____

11/11/10  
*[Handwritten mark]*



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EFD 54-09

DEPARTMENT Nuclear Engineering

EFFECTIVE SESSION Fall 2009 *SP 2011*

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 (department head signature only)  |
| 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 (department head signature only) |
| 6. Change in course credit/type   | 12. Transfer from one department to another                      |

<b>PROPOSED:</b> Subject Abbreviation NUCL Course Number 38299 Long Title Professional Practice 3-Session Co-Op II Short Title <i>Prof Practice Co-Op II</i>	<b>EXISTING:</b> Subject Abbreviation Course Number	<b>TERMS OFFERED</b> Check All That Apply: <input checked="" type="checkbox"/> Summer <input checked="" type="checkbox"/> Fall <input checked="" type="checkbox"/> Spring
Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)		<b>CAMPUS(ES) INVOLVED</b> Calumet Cont Ed Ft. Wayne Indianapolis N. Central Tech Statewide <input checked="" type="checkbox"/> W. Lafayette

<b>CREDIT TYPE</b> 1. Fixed Credit: Cr. Hrs. 0 2. Variable Credit Range: Minimum Cr. Hrs (Check One) To Or Maximum Cr. Hrs. 3. Equivalent Credit: Yes No	<b>COURSE ATTRIBUTES: Check All That Apply</b> 1. Pass/Not Pass Only 2. Satisfactory/Unsatisfactory Only <input checked="" type="checkbox"/> 3. Repeatable Maximum Repeatable Credit: 4. Credit by Examination 5. Special Fees <input checked="" type="checkbox"/> 6. Registration Approval Type Department <input checked="" type="checkbox"/> Instructor 7. Variable Title 8. Honors 9. Full Time Privilege <input checked="" type="checkbox"/> 10. Off Campus Experience <input checked="" type="checkbox"/>
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Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated	Cross-Listed Courses
Lecture					
Recitation					
Presentation					
Laboratory					
Lab Prep					
Studio					
Distance					
Clinic					
Experiential					
Research					
Ind. Study					
Pract/Observ					

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**  
Restriction: Professional Practice students only  
Prerequisite: NUCL 38199  
  
To obtain professional practice with qualified employers within industry, government, or small business.

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 Chancellor _____ Date _____
West Lafayette Department Head _____ Date _____	West Lafayette College/School Dean _____ Date _____
<i>[Signature]</i> 4-23-09	<i>[Signature]</i> 10/26/09
<i>[Signature]</i>	<i>[Signature]</i> 11/7/10

11/11/10  
*[Handwritten mark]*



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EPD 54-09

SPRING 2011

DEPARTMENT Nuclear Engineering

EFFECTIVE SESSION Fall 2009

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

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3. Expiration of a course	9. Change in course description
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5. Change in course title	11. Change in semesters offered (department head signature only)
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<b>PROPOSED:</b> Subject Abbreviation NUCL Course Number 38399 Long Title Professional Practice 3-Session Co-Op III Short Title <i>Prof Practice Co-Op III</i>	<b>EXISTING:</b> Subject Abbreviation Course Number	<b>TERMS OFFERED</b> Check All That Apply: <input checked="" type="checkbox"/> Summer <input checked="" type="checkbox"/> Fall <input checked="" type="checkbox"/> Spring
Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)		<b>CAMPUS(ES) INVOLVED</b> Calumet Cont Ed Fl. Wayne Indianapolis N. Central Tech Statewide <input checked="" type="checkbox"/> W. Lafayette

<b>CREDIT TYPE</b> 1. Fixed Credit: Cr. Hrs. 0 2. Variable Credit Range: Minimum Cr. Hrs. (Check One) To Or Maximum Cr. Hrs. 3. Equivalent Credit: Yes No	<b>COURSE ATTRIBUTES: Check All That Apply</b> 1. Pass/Not Pass Only 2. Satisfactory/Unsatisfactory Only <input checked="" type="checkbox"/> 3. Repeatable Maximum Repeatable Credit: 4. Credit by Examination 5. Special Fees <input checked="" type="checkbox"/> 6. Registration Approval Type Department <input checked="" type="checkbox"/> Instructor 7. Variable Title 8. Honors 9. Full Time Privilege <input checked="" type="checkbox"/> 10. Off Campus Experience <input checked="" type="checkbox"/>
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Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated	Cross-Listed Courses
Lecture					
Recitation					
Presentation					
Laboratory					
Lab Prep					
Studio					
Distance					
Clinic					
Experiential					
Research					
Ind. Study					
Pract/Observ					

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**  
Restriction: Professional Practice students only  
Prerequisite: NUCL 38299  
To obtain professional practice with qualified employers within industry, government, or small business.

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 Chancellor _____ Date _____
West Lafayette Department Head _____ Date _____	West Lafayette College/School Dean _____ Date _____

*Samuel A. Schaffer 11/2/10*  
West Lafayette Registrar

*11/11/10*



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**PROPOSED:**

Subject Abbreviation NUCL

Course Number 38199

Long Title Professional Practice 3-Session Co-Op I

Short Title

**EXISTING:**

Subject Abbreviation

Course Number

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

**TERMS OFFERED**

Check All That Apply:

Summer  Fall  Spring

**CAMPUS(ES) INVOLVED**

Calumet  N. Central   
 Cont Ed  Tech Statewide   
 Ft. Wayne  W. Lafayette   
 Indianapolis

**CREDIT TYPE**

1. Fixed Credit: Cr. Hrs. 0
2. Variable Credit Range:  
 Minimum Cr. Hrs  
 (Check One) To Or  
 Maximum Cr. Hrs.
3. Equivalent Credit: Yes No

**COURSE ATTRIBUTES: Check All That Apply**

1. Pass/Not Pass Only
2. Satisfactory/Unsatisfactory Only
3. Repeatable   
 Maximum Repeatable Credit:
4. Credit by Examination
5. Special Fees
6. Registration Approval Type  
 Department  Instructor
7. Variable Title
8. Honors
9. Full Time Privilege
10. Off Campus Experience

Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
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- ecture
- Recitation
- Presentation
- Laboratory
- Lab Prep
- Studio
- Distance
- Clinic
- Experiential
- Research
- Ind. Study
- Pract/Observ

**Cross-Listed Courses**

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**

Restriction: Professional Practice students only  
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Calumet Department Head _____	Date _____	Calumet School Dean _____	Date _____
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Fort Wayne Department Head _____	Date _____	Fort Wayne School Dean _____	Date _____
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Indianapolis Department Head _____	Date _____	Indianapolis School Dean _____	Date _____
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North Central Department Head _____	Date _____	North Central Chancellor _____	Date _____
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West Lafayette Department Head _____	Date 4-23-09	West Lafayette College/School Dean _____	Date _____	West Lafayette Registrar _____	Date _____
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Course Number 38299	Course Number	<b>CAMPUS(ES) INVOLVED</b>
Long Title Professional Practice 3-Session Co-Op II		Calumet                      N. Central Cont Ed                      Tech Statewide Ft. Wayne <input checked="" type="checkbox"/> W. Lafayette Indianapolis
Short Title		
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2. Variable Credit Range: Minimum Cr. Hrs (Check One) To Or Maximum Cr. Hrs.	2. Satisfactory/Unsatisfactory Only <input checked="" type="checkbox"/>	Department <input checked="" type="checkbox"/> Instructor
3. Equivalent Credit: Yes No	3. Repeatable Maximum Repeatable Credit:	7. Variable Title
	4. Credit by Examination	8. Honors
	5. Special Fees <input checked="" type="checkbox"/>	9. Full Time Privilege <input checked="" type="checkbox"/>
		10. Off Campus Experience <input checked="" type="checkbox"/>

ScheduleType	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated	Cross-Listed Courses
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Recitation					
Presentation					
Laboratory					
Lab Prep					
Studio					
Distance					
Clinic					
Experiential					
Research					
Ind. Study					
Pract/Observ					

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 Prerequisite: NUCL 38199  
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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 Chancellor _____ Date _____
West Lafayette Department Head _____ Date _____	West Lafayette College/School Dean _____ Date _____
<i>[Signature]</i> 4-23-09	<i>[Signature]</i> 10/10/2009
West Lafayette Registrar _____ Date _____	West Lafayette Registrar _____ Date _____



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SPRING 2011

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| 3. Expiration of a course   | 9. Change in course description                                  |
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| 5. Change in course title   | 11. Change in semesters offered (department head signature only) |
| 6. Change in course credit/type   | 12. Transfer from one department to another                      |

PROPOSED:

EXISTING:

**TERMS OFFERED**  
Check All That Apply:

Subject Abbreviation NUCL

Subject Abbreviation

Summer     Fall     Spring

Course Number 38399

Course Number

**CAMPUS(ES) INVOLVED**

Long Title Professional Practice 9-Session Co-Op III

Short Title

Calumet                      N. Central  
Cont Ed                      Tech Statewide  
Fl. Wayne                     W. Lafayette  
Indianapolis

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

**CREDIT TYPE**

**COURSE ATTRIBUTES: Check All That Apply**

1. Fixed Credit: Cr. Hrs. 0
2. Variable Credit Range:  
Minimum Cr. Hrs.                      To                      Or                      Maximum Cr. Hrs.
3. Equivalent Credit: Yes                      No

1. Pass/Not Pass Only
2. Satisfactory/Unsatisfactory Only
3. Repeatable  
Maximum Repeatable Credit:
4. Credit by Examination
5. Special Fees
6. Registration Approval Type  
Department                       Instructor
7. Variable Title
8. Honors
9. Full Time Privilege
10. Off Campus Experience

Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
---------------	-----------------	-------------------	---------------	-----------------------

- Structure
- Acitation
- Presentation
- Laboratory
- Lab Prep
- Studio
- Distance
- Clinic
- Experiential
- Research
- Ind. Study
- Pract/Observ

Cross-Listed Courses

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**

Restriction: Professional Practice students only  
Prerequisite: NUCL 38299

To obtain professional practice with qualified employers within industry, government, or small business.

Calumet Department Head	Date	Calumet School Dean	Date
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Fort Wayne Department Head	Date	Fort Wayne School Dean	Date
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Indianapolis Department Head	Date	Indianapolis School Dean	Date
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North Central Department Head	Date	North Central Chancellor	Date
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 4-23-09	Date		Date	West Lafayette Registrar	Date
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March 10, 2009

**TO:** Faculty of the College of Engineering

**FROM:** Faculty of the School of Nuclear Engineering

**DATE:** March 10, 2009

**RE:** New Course NE38199, NE 38299, NE 38399

The faculty of the School of Nuclear Engineering has approved the following new courses. This action is now submitted to the Engineering Faculty with a recommendation for approval.

**NUCL 38199 Professional Practice ~~3-Session~~ Co-Op I**

Sem 1, 2, and SS. Credits: 0

Restrictions: Professional Practice students only

Prerequisites: Junior standing or consent of instructor

To obtain professional practice with qualified employers within industry, government, or small business.

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**NUCL 38299 Professional Practice ~~3-Session~~ Co-Op II**

Sem 1, 2, and SS. Credits: 0

Restrictions: Professional Practice students only

Prerequisites: NE 38199

To obtain professional practice with qualified employers within industry, government, or small business.

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**NUCL 38399 Professional Practice ~~3-Session~~ Co-Op III**

Sem 1, 2, and SS. Credits: 0

Restrictions: Professional Practice students only

Prerequisites: NE 38299

To obtain professional practice with qualified employers within industry, government, or small business.

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**Rationale:** Transferring the 3-session Professional Practice courses into each individual discipline.

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

ECC Minutes         #6        

Date         11/2/09        

Chairman ECC         Ray Cipra        

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Vince Bralts, Interim Head

