

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

EFD 71-10

Summer
spring 2011

DEPARTMENT School of Chemical Engineering EFFECTIVE SESSION 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 | <input type="checkbox"/> | 7. Change in course attributes (department head signature only) |
| <input type="checkbox"/> | 2. Add existing course offered at another campus | <input type="checkbox"/> | 8. Change in instructional hours |
| <input type="checkbox"/> | 3. Expiration of a course | <input type="checkbox"/> | 9. Change in course description |
| <input type="checkbox"/> | 4. Change in course number | <input type="checkbox"/> | 10. Change in course requisites/restrictions |
| <input type="checkbox"/> | 5. Change in course title | <input type="checkbox"/> | 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> | 6. Change in course credit/type | <input type="checkbox"/> | 12. Transfer from one department to another |

PROPOSED: Subject Abbreviation CHE EXISTING: Subject Abbreviation _____
 Course Number 29199 Course Number _____
 Long Title Professional Practice Extensive Co-Op I
 Short Title Prof Practice Extensive I
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 6 Registration Approval Type
 2. Satisfactory/Unsatisfactory Only Department Instructor
 3. Repeatable 7 Variable Title
 Maximum Repeatable Credit: 8 Honors
 4. Credit by Examination 9 Full Time Privilege
 5. Special Fees 10 Off Campus Experience

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

Cross-Listed Courses

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):
 Restrictions: Departmental Approval Required
 To obtain professional practice with qualified employers within industry, government, or small business.

RECEIVED
 OFFICE OF THE REGISTRAR
 2011 FEB 21 AM 9:19

*COURSE LEARNING OUTCOMES

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 Faculty Senate Chair	Date	Vice Chancellor for Academic Affairs	Date
<u>A Varney</u>	11/8/2010	<u>Michael E. Hein</u>	<u>2/21/11</u>
West Lafayette Department Head	Date	West Lafayette College/School Dean	Date
		West Lafayette Registrar	Date

2/21/11

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

EFD 71-10

DEPARTMENT School of Chemical Engineering EFFECTIVE SESSION Summer 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 | <input type="checkbox"/> 7. Change in course attributes (department head signature only) |
| <input type="checkbox"/> 2. Add existing course offered at another campus | <input type="checkbox"/> 8. Change in instructional hours |
| <input type="checkbox"/> 3. Expiration of a course | <input type="checkbox"/> 9. Change in course description |
| <input type="checkbox"/> 4. Change in course number | <input type="checkbox"/> 10. Change in course requisites/restrictions |
| <input type="checkbox"/> 5. Change in course title | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type | <input type="checkbox"/> 12. Transfer from one department to another |

PROPOSED: Subject Abbreviation <u>CHE</u> Course Number <u>29299</u> Long Title <u>Professional Practice Extensive Co-Op II</u> Short Title <u>Prof Practice Extensive II</u>		EXISTING: Subject Abbreviation _____ Course Number _____		TERMS OFFERED Check All That Apply: <input checked="" type="checkbox"/> Summer <input checked="" type="checkbox"/> Fall <input checked="" type="checkbox"/> Spring	
CAMPUS(ES) INVOLVED <input type="checkbox"/> Calumet <input type="checkbox"/> N. Central <input type="checkbox"/> Cont Ed <input type="checkbox"/> Tech Statewide <input type="checkbox"/> Ft. Wayne <input checked="" type="checkbox"/> W. Lafayette <input type="checkbox"/> Indianapolis				Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)	

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

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):
 Restrictions: Departmental Approval Required
 Prerequisites: CHE 29199
 To obtain professional practice with qualified employers within industry, government, or small business.

*COURSE LEARNING OUTCOMES

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 Faculty Senate Chair	Date	Vice Chancellor for Academic Affairs	Date
<u>A Varma</u>	11/8/2010	<u>Michael J. Harris</u>	2/2/11
West Lafayette Department Head	Date	West Lafayette College/School Dean	Date
		West Lafayette Registrar	Date
		<u>[Signature]</u>	2/2/11

OFFICE OF THE REGISTRAR

2/2/11
[Signature]

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

EFD 11-10

DEPARTMENT School of Chemical Engineering EFFECTIVE SESSION Summer 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 | <input type="checkbox"/> 7. Change in course attributes (department head signature only) |
| <input type="checkbox"/> 2. Add existing course offered at another campus | <input type="checkbox"/> 8. Change in instructional hours |
| <input type="checkbox"/> 3. Expiration of a course | <input type="checkbox"/> 9. Change in course description |
| <input type="checkbox"/> 4. Change in course number | <input type="checkbox"/> 10. Change in course requisites/restrictions |
| <input type="checkbox"/> 5. Change in course title | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type | <input type="checkbox"/> 12. Transfer from one department to another |

PROPOSED:

Subject Abbreviation CHE

Course Number 39399

Long Title Professional Practice Extensive Co-Op III

Short Title Prof Practice Extensive III

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

EXISTING:

Subject Abbreviation _____

Course Number _____

TERMS OFFERED

Check All That Apply:

Summer Fall Spring

CAMPUS(ES) INVOLVED

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Calumet | <input type="checkbox"/> N. Central |
| <input type="checkbox"/> Cont Ed | <input type="checkbox"/> Tech Statewide |
| <input type="checkbox"/> Ft. Wayne | <input checked="" type="checkbox"/> W. Lafayette |
| <input type="checkbox"/> 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
7. Variable Title Department Instructor
8. Honors
9. Full Time Privilege
10. Off Campus Experience

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

Cross-Listed Courses

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

Restrictions: Departmental Approval Required
Prerequisites: 29299

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

COURSE LEARNING OUTCOMES

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 Faculty Senate Chair	Date	Vice Chancellor for Academic Affairs	Date
<u>A Varney</u>	11/8/2010	<u>Michael P. ...</u>	<u>2/22/11</u>
West Lafayette Department Head	Date	West Lafayette College/School Dean	Date
		West Lafayette Registrar	Date

OFFICE OF THE REGISTRAR

2/21/11
[Signature]

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

EFD 71-10

DEPARTMENT School of Chemical Engineering EFFECTIVE SESSION ^{Summer} 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 | <input type="checkbox"/> 7. Change in course attributes (department head signature only) |
| <input type="checkbox"/> 2. Add existing course offered at another campus | <input type="checkbox"/> 8. Change in instructional hours |
| <input type="checkbox"/> 3. Expiration of a course | <input type="checkbox"/> 9. Change in course description |
| <input type="checkbox"/> 4. Change in course number | <input type="checkbox"/> 10. Change in course requisites/restrictions |
| <input type="checkbox"/> 5. Change in course title | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type | <input type="checkbox"/> 12. Transfer from one department to another |

PROPOSED:

Subject Abbreviation CHE

Course Number 39499

Long Title Professional Practice Extensive Co-Op IV

Short Title Prof Practice Extensive IV

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

EXISTING:

Subject Abbreviation _____

Course Number _____

TERMS OFFERED

Check All That Apply:

- Summer Fall Spring

CAMPUS(ES) INVOLVED

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Calumet | <input type="checkbox"/> N. Central |
| <input type="checkbox"/> Cont Ed | <input type="checkbox"/> Tech Statewide |
| <input type="checkbox"/> Ft. Wayne | <input checked="" type="checkbox"/> W. Lafayette |
| <input type="checkbox"/> 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

- | | |
|---|--|
| <input type="checkbox"/> 1. Pass/Not Pass Only | <input type="checkbox"/> 6. Registration Approval Type |
| <input checked="" type="checkbox"/> 2. Satisfactory/Unsatisfactory Only | Department <input checked="" type="checkbox"/> Instructor <input type="checkbox"/> |
| <input type="checkbox"/> 3. Repeatable | 7. Variable Title <input type="checkbox"/> |
| Maximum Repeatable Credit: _____ | 8. Honors <input type="checkbox"/> |
| <input type="checkbox"/> 4. Credit by Examination | 9. Full Time Privilege <input type="checkbox"/> |
| <input type="checkbox"/> 5. Special Fees | 10. Off Campus Experience <input type="checkbox"/> |

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

Cross-Listed Courses

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

Restrictions: Departmental Approval Required
Prerequisites: CHE 39399

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

COURSE LEARNING OUTCOMES

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 Faculty Senate Chair	Date	Vice Chancellor for Academic Affairs	Date
West Lafayette Department Head	Date	West Lafayette College/School Dean	Date

A Varney 11/8/2010 Michael Y. Harris 2/15/11 Janda Schaffer 2/22/11
West Lafayette Registrar Date

OFFICE OF THE REGISTRAR

2/21/11
[Signature]

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

EFD 71-10

DEPARTMENT School of Chemical Engineering EFFECTIVE SESSION Summer / 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 | <input type="checkbox"/> 7. Change in course attributes (department head signature only) |
| <input type="checkbox"/> 2. Add existing course offered at another campus | <input type="checkbox"/> 8. Change in instructional hours |
| <input type="checkbox"/> 3. Expiration of a course | <input type="checkbox"/> 9. Change in course description |
| <input type="checkbox"/> 4. Change in course number | <input type="checkbox"/> 10. Change in course requisites/restrictions |
| <input type="checkbox"/> 5. Change in course title | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type | <input type="checkbox"/> 12. Transfer from one department to another |

PROPOSED:		EXISTING:		TERMS OFFERED Check All That Apply:	
Subject Abbreviation	<u>CHE</u>	Subject Abbreviation		<input checked="" type="checkbox"/> Summer	<input checked="" type="checkbox"/> Fall
Course Number	<u>39599</u>	Course Number		<input checked="" type="checkbox"/> Spring	
Long Title	<u>Professional Practice Extensive Co-Op V</u>		CAMPUS(ES) INVOLVED		
Short Title	<u>Prof Practice Extensive ✓</u>		<input type="checkbox"/> Calumet	<input type="checkbox"/> N. Central	
Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)			<input type="checkbox"/> Cont Ed	<input type="checkbox"/> Tech Statewide	
			<input type="checkbox"/> Ft. Wayne	<input checked="" type="checkbox"/> W. Lafayette	
			<input type="checkbox"/> Indianapolis		

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

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):

Restrictions: Departmental Approval Required
Prerequisites: CHE 39499

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

***COURSE LEARNING OUTCOMES**

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 Faculty Senate Chair	Date	Vice Chancellor for Academic Affairs	Date
<u>A Varney</u>	11/8/2010	<u>Michael J. ...</u>	2/22/11
West Lafayette Department Head	Date	West Lafayette College/School Dean	Date
		<u>Janet ...</u>	

OFFICE OF THE REGISTRAR

2/21/11
9

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

EFD 71-10

DEPARTMENT School of Chemical Engineering EFFECTIVE SESSION 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 | <input type="checkbox"/> 7. Change in course attributes (department head signature only) |
| <input type="checkbox"/> 2. Add existing course offered at another campus | <input type="checkbox"/> 8. Change in instructional hours |
| <input type="checkbox"/> 3. Expiration of a course | <input type="checkbox"/> 9. Change in course description |
| <input type="checkbox"/> 4. Change in course number | <input type="checkbox"/> 10. Change in course requisites/restrictions |
| <input type="checkbox"/> 5. Change in course title | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type | <input type="checkbox"/> 12. Transfer from one department to another |

PROPOSED: Subject Abbreviation CHE EXISTING: Subject Abbreviation _____
 Course Number 29199 Course Number _____
 Long Title Professional Practice Extensive Co-Op I
 Short Title _____
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 6 Registration Approval Type
 2. Satisfactory/Unsatisfactory Only Department Instructor
 3. Repeatable 7 Variable Title
 Maximum Repeatable Credit: _____ 8 Honors
 4. Credit by Examination 9 Full Time Privilege
 5. Special Fees 10 Off Campus Experience

Schedule Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated
Lecture				
Recitation				
Presentation				
Laboratory				
Lab Prep				
Studio				
ance				
.ic				
Experiential				
Research				
Ind. Study				
Pract/Observ				

Cross-Listed Courses

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):
 Restrictions: Departmental Approval Required
 To obtain professional practice with qualified employers within industry, government, or small business.

COURSE LEARNING OUTCOMES

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 Faculty Senate Chair _____ Date _____	Vice Chancellor for Academic Affairs _____ Date _____
<u>A Varney</u> _____ Date <u>11/8/2010</u>	<u>Michael P. ...</u> _____ Date _____
West Lafayette Department Head _____ Date _____	West Lafayette Registrar _____ Date _____

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

EFD 71-10

DEPARTMENT School of Chemical Engineering EFFECTIVE SESSION 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 | <input type="checkbox"/> 7. Change in course attributes (department head signature only) |
| <input type="checkbox"/> 2. Add existing course offered at another campus | <input type="checkbox"/> 8. Change in instructional hours |
| <input type="checkbox"/> 3. Expiration of a course | <input type="checkbox"/> 9. Change in course description |
| <input type="checkbox"/> 4. Change in course number | <input type="checkbox"/> 10. Change in course requisites/restrictions |
| <input type="checkbox"/> 5. Change in course title | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type | <input type="checkbox"/> 12. Transfer from one department to another |

PROPOSED:		EXISTING:		TERMS OFFERED Check All That Apply:	
Subject Abbreviation	<u>CHE</u>	Subject Abbreviation		<input checked="" type="checkbox"/> Summer	<input checked="" type="checkbox"/> Fall
Course Number	<u>29299</u>	Course Number		<input checked="" type="checkbox"/> Spring	
Long Title	<u>Professional Practice Extensive Co-Op II</u>			CAMPUS(ES) INVOLVED	
Short Title				<input type="checkbox"/> Calumet	<input type="checkbox"/> N. Central
Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)					
				<input type="checkbox"/> Cont Ed	<input type="checkbox"/> Tech Statewide
				<input type="checkbox"/> Ft. Wayne	<input checked="" type="checkbox"/> W. Lafayette
				<input type="checkbox"/> Indianapolis	

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

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

Restrictions: Departmental Approval Required
Prerequisites: CHE 29199

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

***COURSE LEARNING OUTCOMES**

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 Faculty Senate Chair	Date	Vice Chancellor for Academic Affairs	Date
<u>A Varney</u>	11/8/2010	<u>Michael J. Stearns</u>	2/1/11
West Lafayette Department Head	Date	West Lafayette College/School Dean	Date
		West Lafayette Registrar	Date

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

EFD 11-10

DEPARTMENT School of Chemical Engineering EFFECTIVE SESSION 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 | <input type="checkbox"/> 7. Change in course attributes (department head signature only) |
| <input type="checkbox"/> 2. Add existing course offered at another campus | <input type="checkbox"/> 8. Change in instructional hours |
| <input type="checkbox"/> 3. Expiration of a course | <input type="checkbox"/> 9. Change in course description |
| <input type="checkbox"/> 4. Change in course number | <input type="checkbox"/> 10. Change in course requisites/restrictions |
| <input type="checkbox"/> 5. Change in course title | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type | <input type="checkbox"/> 12. Transfer from one department to another |

PROPOSED:		EXISTING:		TERMS OFFERED Check All That Apply:		
Subject Abbreviation	<u>CHE</u>	Subject Abbreviation		<input checked="" type="checkbox"/> Summer	<input checked="" type="checkbox"/> Fall	
Course Number	<u>39399</u>	Course Number		<input checked="" type="checkbox"/> Spring		
Long Title	<u>Professional Practice Extensive Co-Op III</u>				CAMPUS(ES) INVOLVED	
Short Title					<input type="checkbox"/> Calumet	<input type="checkbox"/> N. Central
Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)						
<input type="checkbox"/> Cont Ed <input type="checkbox"/> Tech Statewide						
<input type="checkbox"/> Ft. Wayne <input checked="" type="checkbox"/> W. Lafayette						
<input type="checkbox"/> Indianapolis						

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

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

Restrictions: Departmental Approval Required
Prerequisites: 29299

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

***COURSE LEARNING OUTCOMES**

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 Faculty Senate Chair	Date	Vice Chancellor for Academic Affairs	Date
West Lafayette Department Head	Date	West Lafayette College/School Dean	Date
<i>A Varney</i>	11/8/2010	<i>Michael P. ...</i>	11/8/11
		West Lafayette Registrar	Date

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

EFD 71-10

DEPARTMENT School of Chemical Engineering EFFECTIVE SESSION 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 | <input type="checkbox"/> 7. Change in course attributes (department head signature only) |
| <input type="checkbox"/> 2. Add existing course offered at another campus | <input type="checkbox"/> 8. Change in instructional hours |
| <input type="checkbox"/> 3. Expiration of a course | <input type="checkbox"/> 9. Change in course description |
| <input type="checkbox"/> 4. Change in course number | <input type="checkbox"/> 10. Change in course requisites/restrictions |
| <input type="checkbox"/> 5. Change in course title | <input type="checkbox"/> 11. Change in semesters offered (department head signature only) |
| <input type="checkbox"/> 6. Change in course credit/type | <input type="checkbox"/> 12. Transfer from one department to another |

PROPOSED:

Subject Abbreviation CHE

Course Number 39599

Long Title Professional Practice Extensive Co-Op V

Short Title _____

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

EXISTING:

Subject Abbreviation _____

Course Number _____

TERMS OFFERED

Check All That Apply:

- Summer Fall Spring

CAMPUS(ES) INVOLVED

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Calumet | <input type="checkbox"/> N. Central |
| <input type="checkbox"/> Cont Ed | <input type="checkbox"/> Tech Statewide |
| <input type="checkbox"/> Ft. Wayne | <input checked="" type="checkbox"/> W. Lafayette |
| <input type="checkbox"/> 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
Lecture				
Recitation				
Presentation				
Laboratory				
Lab Prep				
Studio				
Distance				
Online				
Experiential				
Research				
Ind. Study				
Pract/Observ				

Cross-Listed Courses

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

Restrictions: Departmental Approval Required
Prerequisites: CHE 39499

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

COURSE LEARNING OUTCOMES

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 Faculty Senate Chair _____ Date _____ Vice Chancellor for Academic Affairs _____ Date _____

A Varney 11/8/2010 Michael J. Haney _____
West Lafayette Department Head _____ Date _____ West Lafayette College/School Dean _____ Date _____

West Lafayette Registrar _____ Date _____

TO: Faculty of the College of Engineering

FROM: The Faculty of the School of Chemical Engineering

DATE: July 6, 2010

RE: New courses numbered: CHE 29199, CHE 29299, CHE 39399, CHE 39499, and CHE 39599

The faculty of the School of Chemical Engineering has approved the following new courses. They are now submitted to the Engineering Faculty with a recommendation for approval.

CHE 29199 Professional Practice Extensive Co-Op I

Sem. 1, 2 or SS, cr. 0.

Restrictions: Professional Practice students only
Departmental Approval Required

CHE 29299 Professional Practice Extensive Co-Op II

Sem. 1, 2 or SS, cr. 0.

Restrictions: Professional Practice students only
Departmental Approval Required

Prerequisite: CHE 29199

CHE 39399 Professional Practice Extensive Co-Op III

Sem. 1, 2 or SS, cr. 0.

Restrictions: Professional Practice students only
Departmental Approval Required

Prerequisite: CHE 29299

CHE 39499 Professional Practice Extensive Co-Op IV

Sem. 1, 2 or SS, cr. 0.

Restrictions: Professional Practice students only
Departmental Approval Required

Prerequisite: CHE 39399

CHE 39599 Professional Practice Extensive Co-Op V

Sem. 1, 2 or SS, cr. 0.

Restrictions: Professional Practice students only
Departmental Approval Required

Prerequisite: CHE 39499

REASON: These courses are taken by students participating in the five-session Professional Practice Program. The numbers were selected to maintain consistency in course numbers and titles for Professional Practice courses throughout all disciplines that currently participate in the Professional Practice Programs.

A Varma

Arvind Varma, Head
School of Chemical Engineering

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

ECC Minutes #9

Date 1-12-2011

Chairman ECC R. Cipa

