

DEPARTMENT School of Nuclear Engineering

DATE SUBMITTED 12/6/00

DATE EFFECTIVE 01-01-2001

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

PURPOSE

- | | | |
|--|-------------------------------------|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> 1. Deletion of a course <input type="checkbox"/> 2. New course with supporting documents <input type="checkbox"/> 3. Add existing course offered at another campus <input type="checkbox"/> 4. Change in course number at same level <input type="checkbox"/> 5. Downgrading of course level <input type="checkbox"/> 6. Upgrading of course level <input type="checkbox"/> 7. Change in course title | <input checked="" type="checkbox"/> | <ul style="list-style-type: none"> 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:

PROPOSED:

SEMESTERS OFFERED

Subject Abbreviation NUCL
Course Number 211

Subject Abbreviation _____
Course Number _____

Check All That Apply.

Summer Fall Ag Winter Spring

Proposed Title _____

Variable Title Yes No

Abbreviated Title _____

Abbreviated title will be entered by the Office of the Registrar if omitted. (22 CHARACTERS ONLY)

CROSS LISTED COURSES

CREDIT TYPE

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

COURSE ATTRIBUTES: Check All That Apply.

- 1. Pass/Not Pass Only
 - 2. Repeatable for Credit
 - 3. Available for Credit by Examination
 - 4. Designator Required
 - 5. Special Fees
 - 6. Approval Required for Enrollment
- Department _____
Instructor _____

Instructional Type
Primary
Secondary
Laboratory
Lab. Prep.

Class Hours 3
FTE _____

Instructional Type
Auto-tutorial
Ind. Study
Clinic
Experiential

Class Hours _____
FTE _____

Instructional Type
Thesis
Observation
Mats Based

Class Hours _____
FTE _____

CAMPUS(ES) INVOLVED

Calumet
Fort Wayne
Indianapolis
North Central
West Lafayette
Off Campus

COURSE DESCRIPTION (PREREQUISITES INCLUDED):

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 <i>C.D. Sutton</i> Appr. for Faculty C.D. Sutton, Chair	Date #944 2/14/01
Indianapolis Department Head	Date	Indianapolis School Dean	Date	Undergrad Curriculum Committee	Date
North Central Department Head	Date	North Central Vice Chancellor	Date	Date Approved by Graduate Council	
<i>R. Bennett</i>	<u>12-7-00</u>	<i>[Signature]</i>	<u>26 Feb 01</u>	Graduate Council Secretary	Date
West Lafayette Department Head	Date	West Lafayette School Dean	Date	<i>Debra Shelt</i>	<u>3/7/01</u>
Graduate Area Committee Convener	Date	Graduate Dean	Date	West Lafayette Registrar	Date

DEPARTMENT School of Nuclear Engineering

DATE SUBMITTED 12/06/00 DATE EFFECTIVE 01-01-2001

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

PURPOSE

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|---|---|
| <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 type="checkbox"/> 13. Change in description of course content |
| <input type="checkbox"/> 7. Change in course title | <input type="checkbox"/> 14. Transfer of course from one dept. to another |

EXISTING:

Subject Abbreviation NUCL
Course Number 300

PROPOSED:

Subject Abbreviation _____
Course Number _____

SEMESTERS OFFERED

Check All That Apply.

Summer Fall Ag Winter Spring

Proposed Title _____

Variable Title Yes No

Abbreviated Title _____

Abbreviated title will be entered by the Office of the Registrar if omitted. (22 CHARACTERS ONLY)

CROSS LISTED COURSES

CREDIT TYPE

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

COURSE ATTRIBUTES: Check All That Apply.

1. Pass/Not Pass Only
2. Repeatable for Credit
3. Available for Credit by Examination
4. Designator Required
5. Special Fees
6. Approval Required for Enrollment
- Department _____
Instructor _____

Instructional Type

Primary 3
Secondary _____
Laboratory _____
Lab. Prep. _____

Class Hours

FTE

Instructional Type

Auto-tutorial _____
Ind. Study _____
Clinic _____
Experiential _____

Class Hours

FTE

Instructional Type

Thesis _____
Observation _____
Matis Based _____

Class Hours

FTE

CAMPUS(ES) INVOLVED

Calumet
Fort Wayne
Indianapolis
North Central
West Lafayette
Off Campus

COURSE DESCRIPTION (PREREQUISITES INCLUDED):

Delete Prerequisite: MA 262
Add Prerequisite: MA 261

Review of atomic properties and introduction to nuclear models. Discussion of radioactive decay and the interaction of nuclear radiation and reaction products with matter. Energetics and cross-sections of nuclear reactions with applications to problems typical of nuclear engineering.

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 _____
Appr. for Faculty C.D. Sutton #944
C.D. Sutton, Chair 2/14/01

Indianapolis Department Head _____ Date _____ Indianapolis School Dean _____ Date _____ Undergrad Curriculum Committee _____ Date _____

North Central Department Head _____ Date _____ North Central Vice Chancellor _____ Date _____ Date Approved by Graduate Council _____

West Lafayette Department Head [Signature] 1-23-01 _____ Date _____ West Lafayette School Dean [Signature] 12/6/00 _____ Date _____ Graduate Council Secretary _____ Date _____

Graduate Area Committee Convener _____ Date _____ Graduate Dean _____ Date _____ West Lafayette Registrar [Signature] 3/7/01 _____ Date _____

DEPARTMENT School of Nuclear Engineering

DATE SUBMITTED 12/06/00 DATE EFFECTIVE 01-01-2001

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

PURPOSE

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|---|---|
| <ul style="list-style-type: none"> 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 | <ul style="list-style-type: none"> 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 <input checked="" type="checkbox"/> 13. Change in description of course content 14. Transfer of course from one dept. to another |
|---|---|

EXISTING:

PROPOSED:

Subject Abbreviation NUCL
Course Number 310

Subject Abbreviation _____
Course Number _____

SEMESTERS OFFERED

Check All That Apply.

Summer Fall Ag Winter Spring

Proposed Title _____

Variable Title Yes No

Abbreviated Title _____

Abbreviated title will be entered by the Office of the Registrar if omitted. (22 CHARACTERS ONLY)

CROSS LISTED COURSES

CREDIT TYPE

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

COURSE ATTRIBUTES: Check All That Apply.

- 1. Pass/Not Pass Only
 - 2. Repeatable for Credit
 - 3. Available for Credit by Examination
 - 4. Designator Required
 - 5. Special Fees
 - 6. Approval Required for Enrollment
- Department _____
Instructor _____

Instructional Type
Primary
Secondary
Laboratory
Lab. Prep.

Class Hours 3
FTE _____

Instructional Type
Auto-tutorial
Ind. Study
Clinic
Experiential

Class Hours _____
FTE _____

Instructional Type
Thesis
Observation
Mails Based

Class Hours _____
FTE _____

CAMPUS(ES) INVOLVED

Calumet
Fort Wayne
Indianapolis
North Central
West Lafayette
Off Campus

COURSE DESCRIPTION (PREREQUISITES INCLUDED):

Delete Prerequisite: MA 262
Add Co-requisite: MA 266

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 <u>C.D. Sutton</u> #944 Appr. for Faculty <u>C.D. Sutton, Chair</u> 2/14/01
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____	Undergrad Curriculum Committee _____ Date _____
North Central Department Head _____ Date _____	North Central Vice Chancellor _____ Date _____	Date Approved by Graduate Council _____
<u>D.L. Bennett</u> 1-25-01 West Lafayette Department Head _____ Date _____	<u>L.J. Wang</u> 2/6/01 West Lafayette School Dean _____ Date _____	Graduate Council Secretary <u>Debra Sheets</u> 3/7/01 Date _____
Graduate Area Committee Convener _____ Date _____	Graduate Dean _____ Date _____	West Lafayette Registrar _____ Date _____

DEPARTMENT **School of Nuclear Engineering**

DATE SUBMITTED **12/00/00** DATE EFFECTIVE **01-01-2001**

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PURPOSE

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

EXISTING:

Subject Abbreviation **NUCL**
Course Number **450**

PROPOSED:

Subject Abbreviation _____
Course Number _____

SEMESTERS OFFERED

Check All That Apply.

Summer Fall Ag Winter Spring

Proposed Title _____
Variable Title Yes No

Abbreviated Title _____
Abbreviated title will be entered by the Office of the Registrar if omitted. (22 CHARACTERS ONLY)

CROSS LISTED COURSES

CREDIT TYPE

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

COURSE ATTRIBUTES: Check All That Apply.

1. Pass/Not Pass Only
2. Repeatable for Credit
3. Available for Credit by Examination
4. Designator Required
5. Special Fees
6. Approval Required for Enrollment
- Department _____
Instructor _____

Instructional Type	Class Hours	FTE
Primary	2	
Secondary		
Laboratory	2	
Lab. Prep.		

Instructional Type	Class Hours	FTE
Auto-tutorial		
Ind. Study		
Clinic		
Experiential		

Instructional Type	Class Hours	FTE
Thesis		
Observation		
Matts Based		

CAMPUS(ES) INVOLVED

Calumet

Fort Wayne

Indianapolis

North Central

West Lafayette

Off Campus

COURSE DESCRIPTION (PREREQUISITES INCLUDED):

Add Prerequisite: NUCL 449

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 C.D. Sutton Date _____ Appr. for Faculty #944 C.D. Sutton, Chair 2/14/01
Indianapolis Department Head _____ Date _____	Indianapolis School Dean _____ Date _____	Undergrad Curriculum Committee _____ Date _____
North Central Department Head _____ Date _____	North Central Vice Chancellor _____ Date _____	Date Approved by Graduate Council _____
West Lafayette Department Head B.K. Bennett Date 1-25-01	West Lafayette School Dean A.J. Vargay Date 2/6/01	Graduate Council Secretary _____ Date _____
Graduate Area Committee Convener _____ Date _____	Graduate Dean _____ Date _____	West Lafayette Registrar Debra Sheets Date 3/1/01