DISAPPROVED: _

The Graduate Academic & Advisory Committee has approved the following:					
GRADUATE PROGRAM REQUES	ST:				
SUBMITTED BY THE GRADUAT	E SCHOOL				
"Moldy" Course Drops: INDS F696S – Graduate Summer Research INDS F696 – Generic Graduate Extended Research INDS F499 - Thesis					
Effective: Fall 2011 unless otherwise specified.					
Rationale: See attach	ned requests.				

Chancellor's / Provost's Office

__ DATE: <u>3 /23/11</u>

DATE:

Submit originals and one copy and electronic copy to Governance/Faculty Senate Office See http://www.uaf.edu/uafgov/faculty/cd for a complete description of the rules governing curriculum & course changes.

	CHANGE COURSE (MAJ	OR) and DROP COUR	SE PROPOSAL
SUBMITTED BY	:		
Department	Graduate School	College/School	Graduate School/Provost
Prepared by	Michelle Baumann	Phone	7464
Email Contac	gradschool@uaf.edu	Faculty Contact	Lawrence K Duffy
1. COURSE IE	DENTIFICATION:	···	
DeptI	NDS Course # F69	No. of Credi	ts 0
COURSE TITE	E	Graduate Summer R	esearch
2 ACTION D	rcinen.		
2. ACTION DE	· · · · · · · · · · · · · · · · · · ·	w what change. D	Prop Course x
NUMBER	TITLE	DESCRIP	
PREQUISITES	L	FREQUENCY OF	· · · · · · · · · · · · · · · · · · ·
	luding credit distribution)	COURSE CLASS	
CROSS-LISTE		(Requires approval of both d at end of form for such signa	lepartments and deans involved. Add lines atures.)
STACKED (40	00/600) Dept.	Course #	
Include syllabi. OTHER (plea:	se specify)		
•			
3. COURSE FO		an three days per credit. Any	course compressed into fewer than six weeks
must be approv	ed by the college or school's curriculum co the core review committee.	uncil. Furthermore, any core	course compressed to less than six weeks must
COURSE FC		3 74	5 x 6 weeks to full
(check all that			semester
that apply)	RMAT (specify all		
Mode of del	ivery (specify		
·	trips, labs, etc)		
	SSIFICATIONS : (undergraduate course is needed, attach on separate sheet.)	es only. Use approved crit	eria found on Page 10 & 17 of the manual
n jastineation	H = Humanities	S = Social So	ciences
	s course be used to fulfill a requiremen	t	YES NO x
	paccalaureate core?	1. (1011	
	k which core requirements it could be $Oral$ Intensive, $Oral$	used to fulfill: Vriting Intensive,Format 7[Natural Science, Format 8
F	format 6 also submitted	submitted	submitted
5. COURSE REP		VEC	NO [
	se repeatable for credit?	YES	NO
	Indicate why the course can be repea t, the course follows a different theme e		
How many t	imes may the course be repeated for cr	redit?	TIMES
	can be repeated with variable credit, v	what is the maximum num	nber of credit hours CREDITS
	earned for this course?		

6. CURRENT CATALOG DESCRIPTION AS IT APPEARS IN THE CATALOG: including dept., number, title	e and credits
7. COMPLETE CATALOG DESCRIPTION AS IT WILL APPEAR WITH THESE CHANGES: (<u>Underline new withrough old wording</u> and use complete catalog format including dept., number, title, credits and credits stacked.) PLEASE SUBMIT NEW COURSE SYLLABUS. For stacked courses the syllabus must clearly differences in required work and evaluation for students at different levels.	oss-listed and
8. IS THIS COURSE CURRENTLY CROSS-LISTED? YES/NO NO If Yes, DEPT NUMBER (Requires written notification of each department and dean involved. Attach a copy of written notification of each department and dean involved.	en notification.
9. GRADING SYSTEM: Specify only one	
LETTER: X PASS/FAIL:	
10. ESTIMATED IMPACT WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC.	
n/a	
11 LIBBARY COLLECTIONS	
11. LIBRARY COLLECTIONS Have you contacted the library collection development officer (kljensen@alaska.edu, 474-6695) with readequacy of library/media collections, equipment, and services available for the proposed course? If so contact and resolution. If not, explain why not.	egard to the o, give date of
No x Yes	
12. IMPACTS ON PROGRAMS/DEPTS: What programs/departments will be affected by this proposed action? Include information on the Programs/Departments contacted (e.g., email, memo)	
n/a	
13. POSITIVE AND NEGATIVE IMPACTS Please specify positive and negative impacts on other courses, programs and departments resulting from proposed action.	om the
n/a	
JUSTIFICATION FOR ACTION REQUESTED The purpose of the department and campus-wide curriculum committees is to scrutinize course change a applications to make sure that the quality of UAF education is not lowered as a result of the proposed change.	and new course lange. Please
address this in your response. This section needs to be self-explanatory. If you ask for a change in # of content of why; are you increasing the amount of material covered in the class? If you drop a prerequisite, is it becommaterial is covered elsewhere? If course is changing to stacked (400/600), explain higher level of effort a	ause the and performance
required on part of students earning graduate credit. Use as much space as needed to fully justify the property and explain what has been done to ensure that the quality of the course is not compromised as a result.	oposed change
Provost requested it to be removed from the catalog for non-use.	

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PPROVALS:	
Januare 1 Suff	Date Jan 12, 2011
Signature, Chair, Program/Department of:	
	Date
Signature, Chair, College/School Curriculum Council for:	7 240
Lamenne K Suffer	Date lan 12, 2011
Signature, Dean, College/School of:	Date Date
Signature of Provost (if applicable)	Date
Offerings above the level of approved programs must be approv	ed in advance by the Provost.
ALL SIGNATURES MUST BE OBTAINED PRIOR TO SUBMISSION	N TO THE GOVERNANCE OFFICE.
	Date
Signature, Chair, UAF Faculty Senate Curriculum Review Comm	
DDITIONAL SIGNATURES: (As needed for cross-listing and/or s	stacking)
Signature, Chair, Program/Department of:	Date
. , , , , , , , , , , , , , , , , , , ,	
Signature Chair College/School Comication Council for	Date
Signature, Chair, College/School Curriculum Council for:	
	Date
Signature, Dean, College/School of:	

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CHANGE COURSE (MAJO	OR) and DROP COUR	SE PROPOSAL
SUBMITTED BY:		
Department Graduate School	College/School	Graduate School/Provost
Prepared by Michelle Baumann	Phone	7464
Email Contact gradschool@uaf.edu	Faculty Contact	Lawrence K Duffy
1. COURSE IDENTIFICATION:		
Dept INDS Course # F690	6 No. of Credit	ts 0
COURSE TITLE	Generic Grad Exto	l Reg
2. ACTION DESIRED: Change Course If Change, indicate below NUMBER TITLE PREQUISITES CREDITS (including credit distribution) CROSS-LISTED Dept. STACKED (400/600) Dept.	DESCRIP FREQUENCY OF COURSE CLASS	OFFERING IFICATION lepartments and deans involved. Add lines
Include syllabi.		
OTHER (please specify)		
3. COURSE FORMAT NOTE: Course hours may not be compressed into fewer that must be approved by the college or school's curriculum cou be approved by the core review committee. COURSE FORMAT: (check all that apply) OTHER FORMAT (specify all that apply) Mode of delivery (specify lecture, field trips, labs, etc)	n three days per credit. Any ncil. Furthermore, any core	course compressed into fewer than six weeks course compressed to less than six weeks must 5
4. COURSE CLASSIFICATIONS: (undergraduate courses If justification is needed, attach on separate sheet.) H = Humanities Will this course be used to fulfill a requirement	S = Social So	
for the baccalaureate core?		1125
IF YES, check which core requirements it could be a O = Oral Intensive, Format 6 also submitted W = W	riting Intensive, Format 7 submitted	Natural Science, Format 8 submitted
5. COURSE REPEATABILITY: Is this course repeatable for credit?	YES	NO
Justification: Indicate why the course can be repeated (for example, the course follows a different theme examples)		
How many times may the course be repeated for cre	edit?	TIMES
If the course can be repeated with variable credit, w that may be earned for this course?	hat is the maximum nun	nber of credit hours CREDITS

6. CURRENT CATALOG DESCRIPTION AS IT APPEARS IN THE CATALOG: including dept., number, title and credits
7. COMPLETE CATALOG DESCRIPTION AS IT WILL APPEAR WITH THESE CHANGES: (<u>Underline new wording strike through old wording</u> and use complete catalog format including dept., number, title, credits and cross-listed and stacked.) PLEASE SUBMIT NEW COURSE SYLLABUS. For stacked courses the syllabus must clearly indicate differences in required work and evaluation for students at different levels.
8. IS THIS COURSE CURRENTLY CROSS-LISTED? YES/NO NO If Yes, DEPT NUMBER
(Requires written notification of each department and dean involved. Attach a copy of written notification.
9. GRADING SYSTEM: Specify only one LETTER: X PASS/FAIL:
17.05/17.1L.
10. ESTIMATED IMPACT WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC.
n/a
11. LIBRARY COLLECTIONS Have you contacted the library collection development officer (kljensen@alaska.edu, 474-6695) with regard to the adequacy of library/media collections, equipment, and services available for the proposed course? If so, give date of contact and resolution. If not, explain why not. No x Yes
12. IMPACTS ON PROGRAMS/DEPTS:
What programs/departments will be affected by this proposed action? Include information on the Programs/Departments contacted (e.g., email, memo)
n/a
13. POSITIVE AND NEGATIVE IMPACTS Please specify positive and negative impacts on other courses, programs and departments resulting from the proposed action.
n/a
JUSTIFICATION FOR ACTION REQUESTED
The purpose of the department and campus-wide curriculum committees is to scrutinize course change and new course applications to make sure that the quality of UAF education is not lowered as a result of the proposed change. Please address this in your response. This section needs to be self-explanatory. If you ask for a change in # of credits, explain why; are you increasing the amount of material covered in the class? If you drop a prerequisite, is it because the material is covered elsewhere? If course is changing to stacked (400/600), explain higher level of effort and performance required on part of students earning graduate credit. Use as much space as needed to fully justify the proposed change and explain what has been done to ensure that the quality of the course is not compromised as a result.
Provost requested it to be removed from the catalog for non-use.

APPROVALS:	/
Lamme K Suff	Date 12,2011
Signature, Chair, Program/Department of	
	Date
Signature, Chair, College/School Curriculum Council for:	
Jamene K Suff	Date fan 12, 2011
Signature, Dean, College/School of:	
	Date
Signature of Provost (if applicable) Offerings above the level of approved programs must be approved in a	dvance by the Provost.
ALL SIGNATURES MUST BE OBTAINED PRIOR TO SUBMISSION TO T	HE GOVERNANCE OFFICE.
	Date
Signature, Chair, UAF Faculty Senate Curriculum Review Committee	
ADDITIONAL SIGNATURES: (As needed for cross-listing and/or stacking	2)
	Date
Signature, Chair, Program/Department of:	
	Date
Signature, Chair, College/School Curriculum Council for:	
	Data
Signature, Dean, College/School of:	Date

Submit originals and one copy and electronic copy to Governance/Faculty Senate Office See http://www.uaf.edu/uafgov/faculty/cd for a complete description of the rules governing curriculum & course changes.

	CHANGE COURSE (MAJOR) a	nd DROP COURS	SE PROPOSAL
SUBMITTED BY:			
Department Gra	duate School	College/School	Graduate School/Provost
Prepared by Mic	helle Baumann	Phone	7464
Email Contact grad	lschool@uaf.edu	Faculty Contact	Lawrence K Duffy
<u></u>			
1. COURSE IDENTIFIC		1	
Dept INDS	Course # F499	No. of Credit	s 1-9
COURSE TITLE		Thesis	
2. ACTION DESIRED: Change Course NUMBER PREQUISITES CREDITS (including cr CROSS-LISTED STACKED (400/600) Include syllabi. OTHER (please specify	Dept. (Requi at end	DESCRIPT FREQUENCY OF COURSE CLASSI	FICATION epartments and deans involved. Add lines
3. COURSE FORMAT NOTE: Course hours may must be approved by the be approved by the core of COURSE FORMAT: (check all that apply) OTHER FORMAT (sput that apply) Mode of delivery (specific trips, lab	college or school's curriculum council. I review committee. 1 2 ecify all	e days per credit. Any of the furthermore, any core	course compressed into fewer than six weeks course compressed to less than six weeks must 5
If justification is needed H = Hur	d, attach on separate sheet.) nanities pe used to fulfill a requirement	S = Social Sc	eria found on Page 10 & 17 of the manual iences
O = Oral Intens	core requirements it could be used to sive, W = Writing so submitted	o fulfill: Intensive, Format 7 submitted	Natural Science, Format 8 submitted
5. COURSE REPEATABILE Is this course repeat		es	NO
	why the course can be repeated rse follows a different theme each ti	me).	
How many times may	the course be repeated for credit?		TIMES
If the course can be re that may be earned fo	epeated with variable credit, what is or this course?	the maximum num	ber of credit hours CREDITS

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8. IS THIS COURSE CURRENTLY CROSS-LISTED? YES/NO NO If Yes, DEPT NUMBER (Requires written notification of each department and dean involved. Attach a copy of written notification
9. GRADING SYSTEM: Specify only one LETTER: PASS/FAIL: x
10. ESTIMATED IMPACT WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC.
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13. POSITIVE AND NEGATIVE IMPACTS Please specify positive and negative impacts on other courses, programs and departments resulting from the proposed action.
n/a
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Provost requested it to be removed from the catalog for non-use.

Signature, Chair, Program/Department of: Date	Signature, Chair, Program/Department of: Date Date Date Signature, Chair, College/School Curriculum Council for: Date Date Date Signature, Chair, College/School of: Signature, Dean, College/School of: Date Signature of Provost (if applicable) Offerings above the level of approved programs must be approved in advance by the Provost. ALL SIGNATURES MUST BE OBTAINED PRIOR TO SUBMISSION TO THE GOVERNANCE OFFICE. Date Signature, Chair, UAF Faculty Senate Curriculum Review Committee ADDITIONAL SIGNATURES: (As needed for cross-listing and/or stacking) Date Signature, Chair, Program/Department of: Date	*****	
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Signature, Chair, Program/Depart/neht/of: Date	Signature, Chair, Program/Department of: Date Signature, Chair, College/School Curriculum Council for:	Lemene K Dulls	Date (2, 2011
Signature, Chair, College/School Curriculum Council for: Date 12, 30 Signature, Dean, College/School of: Date Date Signature of Provost (if applicable) Offerings above the level of approved programs must be approved in advance by the Provost. ALL SIGNATURES MUST BE OBTAINED PRIOR TO SUBMISSION TO THE GOVERNANCE OFFICE. Date Signature, Chair, UAF Faculty Senate Curriculum Review Committee ADDITIONAL SIGNATURES: (As needed for cross-listing and/or stacking) Signature, Chair, Program/Department of: Date Signature, Chair, College/School Curriculum Council for: Signature, Chair, College/School Curriculum Council for: Signature, Chair, College/School Curriculum Council for: Signature, Chair, Chair, Chair, College/School Curriculum Council for: Signature, Chair, Cha	Signature, Chair, College/School Curriculum Council for: Date	Signature, Chair, Program/Depart/neht of:	7
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Signature, Chair, Program/Department of: Date Date Signature, Chair, College/School Curriculum Council for:	Signature, Chair, Program/Department of: Date Date	Signature, Chair, UAF Faculty Senate Curriculum Review C	Committee
Signature, Chair, Program/Department of: Date Date Signature, Chair, College/School Curriculum Council for:	Signature, Chair, Program/Department of: Date Date		
Signature, Chair, Program/Department of: Date Date Signature, Chair, College/School Curriculum Council for:	Signature, Chair, Program/Department of: Date Date		
Signature, Chair, Program/Department of: Date Date Signature, Chair, College/School Curriculum Council for:	Signature, Chair, Program/Department of: Date Date	ADDITIONAL SIGNATURES: (As needed for cross-listing and	d/or stacking)
Signature, Chair, Program/Department of: Date Signature, Chair, College/School Curriculum Council for:	Signature, Chair, Program/Department of: Date		
Signature, Chair, College/School Curriculum Council for:	Date	Signature Chair Brazuare/Danautmant of	Date
Signature, Chair, College/School Curriculum Council for:		Signature, Chair, Program/Department of:	
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1 1 1040 1	Data		Date
Signature Dean College/School of: Date	Signature, Dean, College/School of:	Signature, Dean, College/School of:	Date

The	Graduate	Academic	& P	Advisory	Committee	has	approved	the fo	ollow	ing:

GRADUATE PROGRAM REQUEST:

SUBMITTED BY THE SCHOOL OF NATURAL RESOURCES AND AGRICULTURAL SCIENCES

(Submitted by the Geography Program)

Course Drops: Please see the attached lists of "moldy" courses.

Effective: Fall 2011, unless otherwise specified.

Rationale: See request attached.

APPROVED:	Chancellor's / Provost's Office	DATE: _	3/21/11
DISAPPROVED:	Chancellor's / Provost's Office	DATE: _	

	CHANG	GE COURSE (MA	JOR) and DROP	COURSE PR	OPOSAL	
SUBMITTED BY:						
Department	NRM		College	/School		SNRAS
Prepared by			Phone	718	7188	
Email Contact See http://www.uaf.edu/uafgov/faculty/cd/crules governing curriculum & course change			Faculty Contact y/cd/cdman.html changes.	for a comp	lete descri	ption of the
1. COURSE I	DENTIFICA	TION:		_		 7
	RM	Course #	No. of	Credits		
COURSE TITL	E	ee list of	, moldy	auses		
		') }			
2. ACTION I	se I	f Change, indi hat change.	cate below		rop X	
NUMBER PREQUISITES		TITLE	FREQUEN	DESCRIPTION ICY OF OFFER CLASSIFICAT		
CREDITS (in		redit				
CROSS-LISTE		Dept .	(Requires app involved. Ad signatures.)	roval of both d lines at en	departments	and deans r such
STACKED (40	00/600)	Dept .	Course	e #		
OTHER (plea specify)	ase					
NOTE: Course compressed is council. Fur core review COURSE FO (check on OTHER FOR	e hours may into fewer to the thermore, a committee. **RMAT: e)	not be compresse han six weeks muny core course o	ed into fewer that ust be approved be compressed to les	n three days y the college s than six we	per credit.	Any course curriculum approved by the 6 weeks to tull semester
(specify) Mode of d (specify field tri etc)	elivery lecture, ps, labs,					
Page 10 &	LASSIFICAT: 17 of the umanities	manual. If ju N =	aduate courses stification is Natural cience	only. Use a needed, att	ial Sepa	rate sheet.)
Will this	course be	used to fulfi	ll a requiremen	nt for the	YES	ио
IF YES, o	reate core? check which Intensive, F	core requirem	ments it could l = Writing Intens Format 7	oe used to f	Eulfill: Natural S Forma	

5.	COURSE REPEATABILITY: Is this course repeatable for YES NO credit?
	Justification: Indicate why the course can be repeated (for example, the course follows a different theme each time).
	How many times may the course be repeated for credit?
	If the course can be repeated with variable credit, what is the maximum number of credit hours that may be earned for this course?
6. tit	CURRENT CATALOG DESCRIPTION AS IT APPEARS IN THE CATALOG: including dept., number, le and credits
7.	COMPLETE CATALOG DESCRIPTION AS IT WILL APPEAR WITH THESE CHANGES: (Underline new wording strike through old wording and use complete catalog format including dept., number, title, credits and cross-listed and stacked.) PLEASE SUBMIT NEW COURSE SYLLABUS. For stacked courses the syllabus must clearly indicate differences in required work and evaluation for students at different levels.
	Drop course. Course no longer offered.
8.	IS THIS COURSE CURRENTLY CROSS-LISTED? YES/NO If Yes, DEPT NUMBER (Requires written notification of each department and dean involved. Attack a copy of written notification.)
9.	GRADING SYSTEM: LETTER: PASS/FAIL:
10	. ESTIMATED IMPACT WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC.
11	LIBRARY COLLECTIONS Have you contacted the library collection development officer (ffklj@uaf.edu, 474-6695) with regard to the adequacy of library/media collections, equipment, and services available for the proposed course? If so, give date of contact and resolution. If not, explain why not. NO Yes Yes
12	. IMPACTS ON PROGRAMS/DEPTS: What programs/departments will be affected by this proposed action? Include information on the Programs/Departments contacted (e.g., email, memo)
13	. POSITIVE AND NEGATIVE IMPACTS Please specify positive and negative impacts on other courses, programs and departments resulting from the proposed action.

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The purpose of the department and campus-wide curriculum committees is to scrut course change and new course applications to make sure that the quality of UNF education is not lowered as a result of the proposed change. Please address the of credits, explain why; are you increasing the amount of material cowered class? If you drop a prerequisite, is it because the material is covered elsew if course is changing to stacked (400/600), explain higher level of effort and performance required on part of students earning graduate credit. Use as much as needed to fully justify the proposed change and explain what has been done to ensure that the quality of the course is not compromised as a result. Approvals: Date 1/4/ Signature, Chair, College/School SWAMS Signature, Dean, College/School SWAMS Signature, Dean, College/School Date Signature of Provost (if applicable) Offerings above the level of approved programs must be approved in advettee Frovost. ALL SIGNATURES MUST BE OBTAINED PRIOR TO SUBMISSION TO THE GOVERNANCE OR Signature, Chair, UAF Faculty Senate Curriculum	
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Courses to delete from Banner and Catalog								
	NRM	F398 _	Research	199702	1070 have			
	NRM	F404	Envrnmntl-Impact Statement Law	199702	200101 What was			
	NRM	F431	Wildlife Law and Policy	199702	_200401 VV \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\			
	NRM	F432	Lit of Science & Environment	200303	J			
	NRM	F462	Alaskan Environmental Ed	199702	199803			
	NRM	F607	Biotechnology	199702	$\lambda \sim 10^{-1}$			
	NRM	F625	Adv Ungulate Mgt & Prod Systms	199702	199801			
	NRM	F632	Lit of Science & Environment	200101	200301 / grand			
	NRM	F640	Simulatn & Modelng in Res Mgt	199702	200401 (
	NRM	F678	Ecosystem Management	199702	200401			
	NRM	F681	Natural Area Protection & Mgmt	199702	200101			
	NRM	F690	Adv Topics Res Mgmt	199702				
	NRM	F696	Grad Extd Reg	199702				
	NRM	F696S	Graduate Summer Research	199702				
	NRM	F631	Resource Planning Practicum	199702				