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

DEPARTMENT: Biology
EFFECTIVE SESSION: Fall 2009

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

1. New course with supporting documents
2. Add existing course offered at another campus
3. Expiration of a course
4. Change in course number
5. Change in course title
6. Change in course credit/type
7. Change in course attributes (department head signature only)
8. Change in instructional hours
9. Change in course description
10. Change in course requisites
11. Change in semesters offered (department head signature only)
12. Transfer from one department to another

PROPOSED:

<table>
<thead>
<tr>
<th>Subject Abbreviation</th>
<th>Subject Abbreviation</th>
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<td>BIOL</td>
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Course Number: 217

Long Title: Intermediate Ecology
Short Title: Intermediate Ecology

CAMPUS(ES) INVOLVED:
- Calumet
- Cont Ed
- Ft. Wayne
- Indianapolis
- Tech Statewide
- W. Lafayette

TERM OFFERED:
- Summer
- Fall [X]
- Spring

CREDIT TYPE:
1. Fixed Credit: Cr. Hrs.
2. Variable Credit Range:
   - Minimum Cr. Hrs.
   - Maximum Cr. Hrs.
3. Equivalent Credit: Yes [X] No

COURSE ATTRIBUTES: Check All That Apply
1. Pass/Not Pass Only
2. Satisfactory/Unsatisfactory Only
3. Repeatable
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

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):
P: BIOL 117 and 110 or equivalent with a grade of C or higher

Cross-Listed Courses:

Calumet Department Head: [Signature] Date: 5/19/09
Calumet School Dean: [Signature] Date: 9/15/09
Ft. Wayne Department Head: Date: [Signature]
Ft. Wayne School Dean: Date: [Signature]
Indianapolis Department Head: Date: [Signature]
Indianapolis School Dean: Date: [Signature]
North Central Department Head: Date: [Signature]
North Central Chancellor: Date: [Signature]
West Lafayette Department Head: Date: [Signature]
West Lafayette College/School Dean: Date: [Signature]
West Lafayette Registrar: Date: [Signature]

OFFICE OF THE REGISTRAR