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

DEPARTMENT: Engineering  EFFECTIVE SESSION: Fall 2013

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>
<th>ME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Number</td>
<td>319</td>
<td></td>
</tr>
<tr>
<td>Long Title</td>
<td>Fluid Mechanics Laboratory</td>
<td></td>
</tr>
<tr>
<td>Short Title</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Abbreviated title will be entered by the Office of the Registrar if omitted. (50 CHARACTERS ONLY)

CREDIT TYPE

1. Fixed Credit: Cr. Hrs.
   - 1 LAB
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. Repealable
4. Credit by Examination
5. Fees: [Coop] [Lab] [Rule Request]

Include comment to explain fee

SCHEDULE TYPE

<table>
<thead>
<tr>
<th>Schedule Type</th>
<th>Minutes Per Mlg</th>
<th>Meetings Per Week</th>
<th>Weeks Offered</th>
<th>% of Credit Allocated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lecture</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recitation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Presentation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laboratory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lab Prep</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Studio</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Distance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Experiential</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ind. Study</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pract/Observ</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):
P: ME 293, ME 318

*COURSE LEARNING OUTCOMES:

Calumet Department Head: [Signature] Date: 7/2/13
Calumet School Dean: [Signature] Date: 7/2/13

Fort Wayne Department Head: [Signature] Date: 7/2/13
Fort Wayne School Dean: [Signature] Date: 7/2/13

Indianapolis Department Head: [Signature] Date: 7/2/13
Indianapolis School Dean: [Signature] Date: 7/2/13

North Central Faculty Senate Chair: [Signature] Date: 7/2/13
Vice Chancellor for Academic Affairs: [Signature] Date: 7/2/13

West Lafayette Department Head: [Signature] Date: 7/2/13
West Lafayette College/School Dean: [Signature] Date: 7/2/13

West Lafayette Registrar: [Signature] Date: 7/2/13

OFFICE OF THE REGISTRAR