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

**DEPARTMENT OLS 49600**  
**EFFECTIVE SESSION** Fall 15

**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:**
- Subject Abbreviation
- Course Number
- Long Title
- Short Title

**EXISTING:**
- Subject Abbreviation
- Course Number

**TERMS OFFERED:**
- [x] Fall
- [x] Spring
- [ ] Summer

**CAMPUS(ES) INVOLVED:**
- [x] Calumet
- [ ] Cont Ed
- [ ] N. Central
- [ ] Tech Statewide
- [x] Ft. Wayne
- [x] Indianapolis
- [x] W. Lafayette

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

**COURSE ATTRIBUTES:**
1. Pass/Not Pass Only
2. Satisfactory/Unsatisfactory Only
3. Repeatable
4. Credit by Examination
5. Fees: [ ] Coop [ ] Lab [ ] Rate Request
   - Include comment to explain fee

**Schedule Type**
- Lecture
- Recitation
- Presentation
- Laboratory
- Lab Prep
- Studio
- Distance
- Clinic
- Experiential
- Research
- Ind. Study
- Pract/Observer

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**
Add prerequisite OLS 38400

**COURSE LEARNING OUTCOMES:**

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**Signature Page:**

- Calumet Department Head
- Fort Wayne Department Head
- Indianapolis Department Head
- North Central Faculty Senate Chair
- West Lafayette Department Head

- Calumet School Dean
- Fort Wayne School Dean
- Indianapolis School Dean
- Vice Chancellor for Academic Affairs
- West Lafayette College/School Dean

**Date:**

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**OFFICE OF THE REGISTRAR**