TO: Joseph Khamalah
FROM: Ann Obergfell
RE: Change HSRV 32000
DATE: May 20, 2013

Attached please find the Form 40 for HSRV 32000 Case Methods course. The department wishes to add a pre-requisite to the course. Since this is not a significant content change, it does not need to go the CHHS curriculum committee.

I concur with the programs request for change in prerequisite.
PURDUE UNIVERSITY
REQUEST FOR ADDITION, EXPIRATION,
OR REVISION OF AN UNDERGRADUATE COURSE
(10000-40000 LEVEL)

DEPARTMENT Department of Human Services
EFFECTIVE SESSION Spring 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:

Subject Abbreviation: HSRV
Course Number: 32000
Long Title: Case Methods
Short Title: Case Methods

EXISTING:

Subject Abbreviation: HSRV
Course Number: 32000

TERMS OFFERED:
Check All That Apply:
☐ Fall
☐ Spring
☐ Summer

CAMPUS(ES) INVOLVED:
☐ Calumet
☐ Cont Ed
☐ Ft. Wayne
☐ Tech Statewide
☐ N. Central
☐ W. Lafayette

Abbreviated title will be entered by the Office of the Registrar if omitted. (20 CHARACTERS ONLY)

CREDIT TYPE

1. Fixed Credit: Cr. Hrs. ___________________________
2. Variable Credit Range: Minimum Cr. Hrs. ___________________________
   (Check One) To ☐ Cr ☐
   Maximum Cr. Hrs. ___________________________
3. Equivalent Credit: Yes ☐ No ☐

COURSE ATTRIBUTES: Check All That Apply

1. Pass/Not Pass Only
2. Satisfactory/Unsatisfactory Only
3. Repeatable
   Maximum Repeatable Credit: ___________________________
4. Credit by Examination
5. Fees: ☐ Coop ☐ Lab ☐ Rate Request
   Include comment to explain fee

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS): Add HSRV 20100, Clinical-Case Study I, to the Pre-requisite list

*COURSE LEARNING OUTCOMES:

Cross-Listed Courses

Signature

Calumet Department Head
Date

Calumet School Dean
Date

Fort Wayne Department Head
Date

Fort Wayne School Dean
Date

Indianapolis Department Head
Date

Indianapolis School Dean
Date

North Central Faculty Senate Chair
Date

Vice Chancellor for Academic Affairs
Date

West Lafayette Department Head
Date

West Lafayette College/School Dean
Date

West Lafayette Registrar
Date

OFFICE OF THE REGISTRAR