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

DEPARTMENT Engineering
EFFECTIVE SESSION 01

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 Embedded Real-Time Operating System
Short Title Embed Real-Time Op Sys

PROPOSED CREDIT TYPE
1. Fixed Credit: Cr. Hrs. ____________
2. Variable Credit Range: Minimum Cr. Hrs. ____________
   (Check One) To _________ Or _________
   Maximum Cr. Hrs. ____________
3. Equivalent Credit: Yes ____________ No ____________

PROPOSED CREDIT TYPE

COURSE ATTRIBUTES: Check All That Apply
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
6. Registration Approval Type
   Department _________ Instructor _________
7. Variable Title
8. Honors
9. Full Time Privilege
10. Off Campus Experience

Schedule Type
Lecture _________ Recitation _________ Presentation _________ Laboratory _________
Lab Prep _________ Studio _________ Distance _________
Clinic _________ Experiential _________ Research _________ Ind. Study _________
Pract/Observ _________

Weeks Offered: _________ % of Credit Allocated: _________

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):
P: ECE 362, C: ECE 358

* COURSE LEARNING OUTCOMES:

Columnel Department Head ____________ Date ____________
Fort Wayne Department Head ____________ Date ____________
Indianapolis Department Head ____________ Date ____________
North Central Faculty Senate Chair ____________ Date ____________
West Lafayette Department Head ____________ Date ____________

Columnel School Dean ____________ Date ____________
Fort Wayne School Dean ____________ Date ____________
Indianapolis School Dean ____________ Date ____________
Vice Chancellor for Academic Affairs ____________ Date ____________
West Lafayette College/School Dean ____________ Date ____________

OFFICE OF THE REGISTRAR