

New Course Request

JUN 25 2009 Indiana University

IUPUI Campus

Check Appropriate Boxes:

Undergraduate credit

Graduate credit

Professional credit 96

1. School/Division Liberal Arts 2. Academic Subject Code OVST-A
 3. Course Number 591 (must be cleared with University Enrollment Services) 4. Instructor 0001864001
 5. Course Title Overseas study in Comayagua, Honduras - Dentistry
 Recommended Abbreviation (Optional) _____

6. First time this course is to be offered (Semester/Year): Spring Summer 2009 (limited to 32 Characters including spaces)

7. Credit Hours: Fixed at 0 or Variable from _____ to _____

8. Is this course to be graded S-F (only)? Yes _____ No

9. Is variable title approval being requested? Yes _____ No

10. Course description (not to exceed 50 words) for Bulletin publication: Overseas Study in Comayagua, Honduras - Dentistry

11. Lecture Contact Hours: Fixed at 0 or Variable from _____ to _____

12. Non-Lecture Contact Hours: Fixed at _____ or Variable from _____ to _____

13. Estimated enrollment: 5 of which 100 percent are expected to be graduate students.

14. Frequency of scheduling: 1/year Will this course be required for majors? no

15. Justification for new course: Administrative tracking function for participants in overseas studies programs.

16. Are the necessary reading materials currently available in the appropriate library? NA

17. Please append a complete outline of the proposed course, and indicate instructor (if known), textbooks, and other materials.

18. If this course overlaps with existing courses, please explain with which courses it overlaps and whether this overlap is necessary, desirable, or unimportant.

19. A copy of every new course proposal must be submitted to departments, schools, or divisions in which there may be overlap of the new course with existing courses or areas of strong concern, with instructions that they send comments directly to the originating Curriculum Committee. Please append a list of departments, schools, or divisions thus consulted.

Submitted by: Stephanie Leslie Date 12/30/08
Department Chairman/Division Director

Approved by: W. Blomquist Date 1/5/09
Dean

Date _____
Dean of Graduate School (when required)

S. Queen Date 6/2/09
Chancellor/Vice-President

Jaeger O'Pat Date 4/1/09
IUPUI Curriculum Sub Committee

Date _____
University Enrollment Services

After School/Division approval, forward the last copy (without attachments) to University Enrollment Services for initial processing, and the remaining four copies and attachments to the Campus Chancellor or Vice-President.