

New Course Request

Indiana University

Kokomo

Campus

Check Appropriate Boxes:

Undergraduate credit

Graduate credit

Professional credit

1. School/Division BUSINESS 2. Academic Subject Code BUS

3. Course Number S435 (must be cleared with University Registrar) 4. Instructor

5. Course Title Advanced Topics in Computer Information Systems

Recommended Abbreviation (Optional) (limited to 32 Characters including spaces)

6. First time this course is to be offered (Semester/Year): fall 2006

7. Credit Hours: Fixed at 3 or Variable from to

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

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

10. Course description (not to exceed 50 words) for Bulletin publication: P: S302. Variable topics course; topics offered will depend on student interest and faculty interest and expertise. Possible topics include telecommunications and networking, advanced systems development methods, data administration, and management of the information systems function.

11. Lecture Contact Hours: Fixed at 3 or Variable from to

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

13. Estimated enrollment: 12 of which 100% percent are expected to be graduate students.

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

15. Justification for new course:

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

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:

Approved by:

[Signature]

[Signature]

Date 12/15/05

Date 01/09/06

~~Faculty Representative~~ Dean

Dean

Date

Date 1/10/06

Dean of Graduate School (when required)

Chancellor/Vice-President

Date

University Registrar

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