

Course exists in  
+ U System.

New Course Request of CAMPUS Indiana University

KOKOMO Campus

Check Appropriate Boxes: Undergraduate credit  Graduate credit  Professional credit

- 1. School/Division SOAS 2. Academic Subject Code HIST-A
- 3. Course Number A348 (must be cleared with University Enrollment Services) 4. Instructor S. PARKINSON, PH.D.
- 5. Course Title CIVIL WAR & RECONSTRUCTION
- Recommended Abbreviation (Optional) \_\_\_\_\_
- 6. First time this course is to be offered (Semester/Year): SPRING 2005 (Limited to 32 Characters including spaces)
- 7. Credit Hours: Fixed at 3 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: \_\_\_\_\_

DESCRIPTION ALREADY EXISTS  
THIS IS AN EXISTING COURSE

- 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: 25 of which \_\_\_\_\_ percent are expected to be graduate students.
- 14. Frequency of scheduling: AS NEEDED Will this course be required for majors? NO
- 15. Justification for new course: NEW UPPER LEVEL FOR EXPANDING HISTORY/POLITICAL SCIENCE DEGREE
- 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: \_\_\_\_\_ Date 7/12/05  
 Department Chairman/Division Director  
 \_\_\_\_\_ Date \_\_\_\_\_  
 Dean of Graduate School (when required)

Approved by: \_\_\_\_\_ Date 7/18/05  
 Dean  
 \_\_\_\_\_ Date 7/20/05  
 Chancellor/Vice-President

\_\_\_\_\_ 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.