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٠ 5.	COURSE REPEATABILITY:
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	credit?
	Justification: Indicate why the course can be
	repeated (for example, the course follows a different
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	How many times may the course be repeated for credit?
	If the course can be repeated with variable credit, what is the CREDITS
	credit hours that may be earned for this course?
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Courses to delete from Banner and Catalog

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NRM	F398	Research	199702	
NRM	F404	Envrnmntl Impact Statement Law	199702	200101
NRM	F431	Wildlife Law and Policy	199702	200401
NRM	F432	Lit of Science & Environment	200303	

undergrad.

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NRM	F607	Biotechnology	199702		Tv.
NRM	F625	Adv Ungulate Mgt & Prod Systms	199702	199801	a un
NRM	F632	Lit of Science & Environment	200101	200301	graduate
NRM	F640	Simulatn & Modelng in Res Mgt	199702	200401	12 Mins
NRM	F678	Ecosystem Management	199702	200401	J
NRM	F681	Natural Area Protection & Mgmt	199702	200101	
NRM	F690	Adv Topics Res Mgmt	199702		
NRM	F696	Grad Extd Reg	199702		
NRM	F696S	Graduate Summer Research	199702		
NRM	F631	Resource Planning Practicum	199702		

	Submit originals and one copy	and electronic copy to	o Governance/Faculty Senate Office
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	CHANGE COURSE (MAJOR) a	and DROP COURSE	PROPOSAL
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SUBMITTED BY: Department	Conducto Calcad] Callaca (Salaca) [
Prepared by	Graduate School	College/School	Graduate School/Provost
-	Michelle Baumann	Phone	7464
Linaii Contact	gradschool@uaf.edu	Faculty Contact	Lawrence K Duffy
1. COURSE IDEN	ITIFICATION:		
Dept IND		No. of Credits	0
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COURSE TITLE	<u>G</u>	raduate Summer Reso	earch
2. ACTION DESII	RED:		
Change Course	If Change, indicate below what	t change. Drop	p Course x
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PREQUISITES	ing and it distribution)	FREQUENCY OF OI	

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<i>7</i> . (COMPLETE CATALOG DESCRIPTION AS IT WILL APPEAR WITH THESE CHANGES: (<u>Underline new wording strike</u> through old wording and use complete catalog format including dept., number, title, credits and cross-listed and stacked.) PLEASE SUBMIT NEW COURSE SYLLABUS. For stacked courses the syllabus must clearly indicate differences in required work and evaluation for students at different levels.
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8. <i>I</i> :	S THIS COURSE CURRENTLY CROSS-LISTED? YES/NO NO If Yes, DEPT NUMBER (Requires written notification of each department and dean involved. Attach a copy of written notification.
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10.	ESTIMATED IMPACT WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC.
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11. /	WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC.
11. (WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC. In/a LIBRARY COLLECTIONS Have you contacted the library collection development officer (kljensen@alaska.edu, 474-6695) with regard to the adequacy of library/media collections, equipment, and services available for the proposed course? If so, give date of contact and resolution. If not, explain why not.
11. (WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC. In/a LIBRARY COLLECTIONS Have you contacted the library collection development officer (kljensen@alaska.edu, 474-6695) with regard to the adequacy of library/media collections, equipment, and services available for the proposed course? If so, give date of contact and resolution. If not, explain why not. No x Yes WHACTS ON PROGRAMS/DEPTS: What programs/departments will be affected by this proposed action? Include information on the Programs/Departments contacted (e.g., email, memo)
11. l	WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC. In/a LIBRARY COLLECTIONS Have you contacted the library collection development officer (kljensen@alaska.edu, 474-6695) with regard to the adequacy of library/media collections, equipment, and services available for the proposed course? If so, give date of contact and resolution. If not, explain why not. No x Yes WHACTS ON PROGRAMS/DEPTS: What programs/departments will be affected by this proposed action?
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PROVALS:		1	
ignature, Chair, Program/Department of:	Date	fan 12, 2011	
ignactic, Chair, Program/Department (ii.			
ignature, Chair, College/School Curriculum Council fo	r: Date		
Jamenne K Suffy	Date	Jan 12, 2011	
ignature, Dean, College/School of:			
and the of December (if a malical la)	Date		
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ignature of Provost (if applicable) Offerings above the level of approved programs must be signed by the level of approved programs of the level of the le	e approved in advance		
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Submit originals and one copy and electronic copy to Governance/Faculty Senate Office See http://www.uaf.edu/uafgov/faculty/cd for a complete description of the rules governing curriculum & course changes.

Department	Graduate School	College/School	Graduate School/Provost
Prepared by	Michelle Baumann	Phone	7464
Email Contact	gradschool@uaf.edu	Faculty Contact	Lawrence K Duffy
1 COURSEIN	ENTIFICATION:		
		F696 No. of Credits	0
COURSE TITLE		Generic Grad Extd Reg	
ACTION DE Change Course		low what change Drop (Course x
NUMBER			
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STACKED (400	0/600) Dept.	Course #	<u>, </u>
Include syllabi. OTHER (please	o specify)		
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3. COURSE FO			
NOTE: Course he	ours may not be compressed into fewer	than three days per credit. Any cours	e compressed into fewer than six weeks
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	differences in required work and evaluation for students at different levels.

APPI	POVALS:		4	/	,
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Submit originals and one copy and electronic copy to Governance/Faculty Senate Office See http://www.uaf.edu/uafgov/faculty/cd for a complete description of the rules governing curriculum & course changes.

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	APPROVALS:	
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