

New Course Request

Matching  
Indiana University

East Campus

Check Appropriate Boxes: Undergraduate credit  Graduate credit  Professional credit

1. School/Division Natural Science & Math 2. Academic Subject Code Geol

3. Course Number G415 (must be cleared with University Enrollment Services) 4. Instructor \_\_\_\_\_

5. Course Title Principles of Geomorphology

Recommended Abbreviation (Optional) \_\_\_\_\_  
(Limited to 32 Characters including spaces)

6. First time this course is to be offered (Semester/Year): Fall 2008

7. Credit Hours: Fixed at ~~3~~ or Variable from 3 to 4

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: Geomorphic processes, evolution & classification of landforms.

11. Lecture Contact Hours: Fixed at \_\_\_\_\_ or Variable from 2 to 3

12. Non-Lecture Contact Hours: Fixed at \_\_\_\_\_ or Variable from 0 to 4

13. Estimated enrollment: 2 of which 0 percent are expected to be graduate students.

14. Frequency of scheduling: Irregular Will this course be required for majors? No

15. Justification for new course: Need for Earlham College course exchange

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. N/A

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: Kumara Jayasingh Date 8/27/08  
Department Chairman/Division Director

\_\_\_\_\_  
Date \_\_\_\_\_  
Dean of Graduate School (when required)

Approved by: Samuel B. Reinhardt Date 8/27/08  
Dean

[Signature] Date 9/2/08  
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.