



**FLORIDA INTERNATIONAL UNIVERSITY
UNIVERSITY CURRICULUM COMMITTEE**
Proposal for a New Course

DO NOT TYPE IN THIS BOX
Bulletin # : _____
Academic Year : _____

1. School/College Engineering and Computing
Div./Dept. in Which Taught School of Computing and Information Sciences

2. CDA 3 _____ 3 CIP Code (Leave this blank): _____
Alpha 1st Last 3 "C"-lec-lab Cr. Hrs.
Prefix Digit Digits "L"-Lab

3. Grading Method (select one): Graded Pass/Fail

4a. Course Title Computer Architecture

b. Abbreviated course Title (for computer class schedules, transcripts) Computer Architecture
LIMITED TO 25 Characters (including spaces)

5. Statewide Course Numbering Subject Matter Area CDA (Computer Design/Architecture)

6. Catalog Description/Major Topics (not to exceed 200 characters including spaces)

College of Medicine and College of Law: Attach description not exceeding 1,000 characters including spaces.

Covers the levels of organization in a computer: digital logic; machine and assembly language programming, design of memory, buses, ALU, CPU; virtual memory, I/O.

7. Attach detailed syllabus course outline and course justification on separate page(s).

8. Prerequisite(s): COP 3337 and (COT 3100 or MAD 2104)

9. Corequisite(s): None

10. Objective(s) of Course:

Mastery in machine and assembly language programming; design of combinational and sequential circuits, memory, ALU, and CPU; Exposure to cache architectures, branch predictions & multiple instrn issue

11. Does this course duplicate/overlap other courses at FIU? No Yes


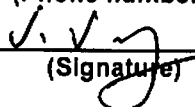
If yes, please explain: _____

12. What other closely related department(s) have been consulted about this course?

Electrical and Computer Engineering

13. Is this course used for the assessment of a program or a certificate (if yes, then send a notification to assessment@fiu.edu)? No Yes

PROPOSAL REQUESTED BY:

Faculty Contact	<u>Trevor Cickovski</u>		<u>3</u>	<u>/</u>	<u>21</u>	<u>/</u>	<u>20</u>	<u>19</u>
	(Type name)	(Signature)						
	<u>tcickovs@fiu.edu</u>	<u>305-348-8043</u>						
	(Email address)	(Phone number)						
Chairperson (Dept./Div.)	<u>S.S. Iyengar</u>		<u>3</u>	<u>/</u>	<u>21</u>	<u>/</u>	<u>20</u>	<u>19</u>
	(Type name)	(Signature)						
Chairperson (Curr. Comm.)	<u>Cesar Levy</u>			<u>/</u>		<u>/</u>	<u>20</u>	<u>19</u>
	(Type name)	(Signature)						
College/School Dean	<u>John Volakis</u>			<u>/</u>		<u>/</u>	<u>20</u>	<u>19</u>
	(Type name)	(Signature)						

Submit one original form. Attach one copy of the course justification and course syllabus, course description, objectives, major topics and textbooks.