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

FLORIDA INTERNATIONAL UNIVERSITY
UNIVERSITY CURRICULUM COMMITTEE
Proposal for a New Course

1. **School/College** Engineering and Computing

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

2. COP | 4 | | | 3 — **CIP Code** ***(Leave this blank):*** _____

Alpha Prefix	1st Digit	Last 3 Digits	"C"-lec-lab "L"-Lab	Cr. Hrs.
COP	4			3

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

4a. **Course Title** Advanced Database Management

b. **Abbreviated course Title** ***(for computer class schedules, transcripts)*** Advanced DB Management

LIMITED TO 25 Characters *(including spaces)*

5. **Statewide Course Numbering Subject Matter Area** Computer Programming

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.

   Design & management of enterprise systems; query optimization, transaction processing; concurrency techniques; web queries; XML interchanges; data warehousing, datamining; OLAP; NOSQL and bigdata.

7. **Attach detailed syllabus course outline and course justification on separate page(s).**
8. **Prerequisite(s):** COP-4703 or COP-4710
9. **Corequisite(s):** None
10. **Objective(s) of Course:**

    To educate students in emerging database technologies and enable them to acquire competitive skills that are in high demand.

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?**

    _____

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 Nagarajan Prabakar — 3 / 19 / 20 20
(Type name) **(Signature)**

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(Email address) **(Phone number)**

Chairperson (Dept./Div.) S.S. Iyengar — 3 / 19 / 20 20
(Type name) **(Signature)**

Chairperson (Curr. Comm.) Wei-Chiang Lin — ___ / ___ / 20 20
(Type name) **(Signature)**

College/School Dean John Volakis — ___ / ___ / 20 20
(Type name) **(Signature)**

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