**CURRICULUM PROPOSAL**

**APPROVAL PAGE**

**Proposal Title:**

**College:       Department:**

**DEPARTMENT CHAIR- Insert Department Chair Name**

**I have read the enclosed proposal and approve this proposal on behalf of the department.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**

**COLLEGE CURRICULUM COMMITTEE CHAIR - Insert Chair Name**

**I have read the enclosed documents and approve the proposal on behalf of the college curriculum committee.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**

**COLLEGE DEAN - Insert Dean Name**

**I have read the enclosed documents and approve the proposal on behalf of the college. I certify that the necessary funds will be allocated by the college in support of this proposal.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**

## CURRICULUM CHANGE MEMO

**Date:**

**From: Proposing Faculty Member, Department**

**Through: Chair, Department**

**Through: Dean, College**

**To: Chair, Undergraduate Curriculum Committee or Graduate Council**

**Proposal Title:**

**Select the proposal content (select as many as apply) and provide the rationale.**

**Content**

[ ]  New program or [ ]  Program Change

 [ ]  Bachelor’s

 [ ]  Master’s

 [ ]  Doctoral/Professional

 [ ]  Certificate

 [ ]  Fast Track

 [ ]  Minor

 [ ]  Concentration/Track

[ ]  New Course

[ ]  Closure (program, certificate, minor, concentration)

[ ]  Change

 [ ]  CIP Code

 [ ]  Program/certificate SCH

 [ ]  Course Title

 [ ]  Course Description

[ ]  Course Prerequisite/Restriction

 [ ]  Graduate Program Admission Requirements

**Rationale**

**COURSE CHANGE FORM**

**COPY OF CATALOG PAGE NOT REQUIRED**

**All fields below are required**

**College :       Department :       Effective Term :**

**Rationale for changing the course:**

**All fields below are required**

**Subject Prefix and number**

**Course Title**

**(Course descriptions are limited to 600 characters)**

**(Course titles are limited to 29 characters)**

|  |  |  |
| --- | --- | --- |
| **Change** | **From** | **To** |
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**These changes will be reflected in Banner, Goldmine, and the catalog**