

PROCESS A Curriculum Submission Form Rowan University Senate
To Propose a New Course or Change (an) Existing Course(s) (Non-Rowan Core)

18-19

Proposal Title: _____

Lead Sponsor: _____ Email: _____

Type of Proposal: New Course in an existing program New Course in a new program Change(s) to existing course(s)

Name of Degree/Non-Degree Program: _____

Department: _____ College: _____

DEPARTMENT AND DEAN APPROVAL (Signatures Required for Submission to University Senate Office):

Dept. Chair: _____ Date: _____

Dept. Head (if applicable): _____ Date: _____

Dept Curriculum Chair: _____ Date: _____

Academic DEAN: _____ Date: _____

Academic DEAN (Interdisciplinary): _____ Date: _____

COLLEGE CC APPROVAL: Open Hearing Date: _____ Approved Not Approved

Signature College Curriculum Chair: _____ Date: _____

SENATE CC CHAIR APPROVAL: Approved Not Approved

Signature Senate Curriculum Chair: _____ Date: _____

Comments: _____

PROVOST APPROVAL: Approved Not Approved

Provost Signature: _____ Date: _____

REGISTRAR ACKNOWLEDGEMENT:

Registrar Signature: _____ Date: _____

PROVOST'S OFFICE TRANSMITTAL NOTIFICATION:

Date: _____ Signature: _____