

PROCESS C Curriculum Submission Form Rowan University Senate

18-19

To Propose Minor Changes (3 or fewer) to an Existing Degree or Non-Degree Program

Proposal Title: _____

Lead Sponsor: _____ Email: _____

Name of Degree/Non-Degree Program: _____

Department: _____ College: _____

Interdisciplinary No Intra-College Inter-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 (Optional): _____ Date: _____

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

Signature College Curriculum Chair: _____ Date: _____

SENATE CC APPROVAL: Approved Not Approved

Signature Senate Curriculum Chair: _____ Date: _____

Comments: _____

PROVOST APPROVAL: Approved Not Approved

Provost Signature: _____ Date: _____

REGISTRAR ACKNOWLEDGEMENT:

Registrar Signature: _____ Date: _____

PROVOST OFFICE TRANSMITTAL NOTIFICATION:

Date: _____ Signature: _____