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: __________________________________________