**CATALOG/GUIDELINE REVISION PROPOSAL**

**Fill in all sections (1 - 4)**

|  |
| --- |
| **Section 1 – GENERAL INFORMATION** |
| Initiator: Click here to enter text. | Department: Click here to enter text. | Date Submitted: Click here to enter a date. | Effective Term/Year: Click here to enter text. |
| E-mail: Click here to enter text. | Phone Number: Click here to enter text. | State Mandated? [ ] Yes [ ] No |
| **Section 2 – CATALOG/GUIDELINES DETAILS - CURRENT**  |
| Click here to enter text. |
| **Section 3 – CATALOG/GUIDELINES DETAILS - REVISED**  |
|  Click here to enter text. |
| **Section 4 – RATIONALE/JUSTIFICATION FOR THE PROPOSED CHANGE**  |
| Click here to enter text. |

**CURRICULUM PROPOSAL - Signatures**

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Person submitting proposal Date

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

Dean/Director of Division submitting proposal Date

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

VP for Area submitting proposal Date

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

 Provost/ VP for Academic Affairs Date

Office Use only:

Date presented to APC: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date approved by APC: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date approved by BOT: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_