**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**

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

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: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_