



Request for Change in Program Requirements

PLEASE COMPLETE AS INDICATED

| | | | |
|--|--|--------------------|--|
| TITLE OF PROGRAM | | | |
| TERM AND YEAR OF REQUESTED IMPLEMENTATION | | | |
| COLLEGE: | | DEPARTMENT: | |
| CONTACT PERSON: | | PHONE: | |
| E-MAIL: | | | |

SIGNATURES:

IF DISAPPROVED OR APPROVED WITH RESERVATIONS, ATTACH RATIONALE FOR SUCH ACTION.

| | | | |
|---------------------------------------|------|----------------------------------|-------------------------------------|
| DEPARTMENT CHAIR | DATE | <input type="checkbox"/> APPROVE | <input type="checkbox"/> DISAPPROVE |
| COLLEGE CURRICULUM COMMITTEE | DATE | <input type="checkbox"/> APPROVE | <input type="checkbox"/> DISAPPROVE |
| COLLEGE DEAN(S) | DATE | <input type="checkbox"/> APPROVE | <input type="checkbox"/> DISAPPROVE |
| GRADUATE DEAN (GRADUATE COURSES ONLY) | DATE | <input type="checkbox"/> APPROVE | <input type="checkbox"/> DISAPPROVE |
| UNIVERSITY CURRICULUM COMMITTEE | DATE | <input type="checkbox"/> APPROVE | <input type="checkbox"/> DISAPPROVE |
| UNIVERSITY SENATE | DATE | <input type="checkbox"/> APPROVE | <input type="checkbox"/> DISAPPROVE |

1. List the proposed program requirements change(s).

2. Provide a rationale for the change(s).

3. Attach a comparison of the old program with the new program. This comparison should address an increase/decrease in credits with the net change in credits calculated.

4. If applicable, attach revised program information in the form of catalog language underlining information that would be added to the current catalog, and striking out any information that would be deleted from the current catalog.

5. Is this course required in any existing or proposed program?

Yes*

No

* If yes, attach letter of agreement from department chairs or other administrators responsible for the programs or majors affected by this change.