**GRADUATE COURSE CHANGE PROPOSAL**

|  |  |
| --- | --- |
| **ACADEMIC UNIT:** |  |
| **DATE PREPARED:** |  |
| **PRIMARY AUTHOR(S):** |  |

**ACADEMIC PROGRAM**

**FACULTY APPROVED:**

**(Signature of Program Coordinator or Chair of Program Curriculum Committee) (Date)**

**CHAIRPERSON APPROVED:**

**(Chairperson’s Signature) (Date)**

**DEAN APPROVED**

  **(Dean’s signature) (Date)**

 **GRADUATE COUNCIL
APPROVED**

 **(Director of Graduate Studies Signature (Date)**

1. CURRENT COURSE NUMBER:

2. CURRENT COURSE TITLE (Limited to 32 Spaces Including Blanks):

3. Starting With: \_\_\_ Semester Year

4. CROSSLISTING DEPARTMENTS (attach supporting letters);

a) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ c) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ d)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. CHECK ITEM(S) BELOW FOR CHANGES DESIRED:

|  |  |  |
| --- | --- | --- |
| \_\_\_\_Course Number | \_\_\_\_\_Course Title  | \_\_\_\_\_Crosslist Status |
| \_\_\_\_Credits | \_\_\_\_\_Grading System | \_\_\_\_\_Prerequisites |
| \_\_\_\_Planned Offering | \_\_\_\_\_Catalogue Description | \_\_\_\_\_Delete Course |
| \_\_\_\_Course Level | \_\_\_\_\_Required Status | \_\_\_\_\_Other |

6. EXPLANATION/JUSTIFICATION FOR REQUESTED CHANGE(S). ENTER BOTH CURRENT AND PROPOSED DATA FOR EACH CHANGE (use additional pages as necessary):