Proposal Title: 

Lead Sponsor: ____________________________ Email: ____________________________

Type of Proposal: 
- [ ] New Course in an existing program
- [ ] New Course in a new program
- [ ] Change(s) to existing course(s)

Name of Degree/Non-Degree Program: ____________________________________________

Department: ____________________________ College: ____________________________

If CHSS check: 
- [ ] Humanities
- [ ] Social Sciences ___

Interdisciplinary: 
- [ ] No
- [ ] Intra-College
- [ ] Inter-College

DEPARTMENT AND DEAN APPROVAL (Signatures Required for Submission to University Senate Office):

Dept. Chair: ____________________________ 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 CHAIR APPROVAL: □ Approved □ Not Approved

Signature Senate Curriculum Chair: ____________________________ Date: __________

Comments: __________________________________________________________________________

________________________________________________________________________________________

PROVOST APPROVAL: □ Approved □ Not Approved

Provost Signature: ____________________________ Date: __________

REGISTRAR ACKNOWLEDGEMENT:

Registrar Signature: ____________________________ Date: __________

PROVOST'S OFFICE TRANSMITTAL NOTIFICATION:

Date: __________ Signature: ____________________________