PROCESS C Curriculum Submission Form  Rowan University Senate

To Propose Minor Changes (3 or fewer) to an Existing Degree or Non-Degree Program

Proposal Title: ________________________________________________________________

Lead Sponsor: ___________________________  Email: _________________________________

Name of Degree/Non-Degree Program: _____________________________________________

Department: ____________________________  College: ________________________________

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 APPROVAL:

□ Approved  □ Not Approved

Signature Senate Curriculum Chair: _________________________  Date: ____________

Comments: _______________________________________________________________________

______________________________________________  _______

PROVOST APPROVAL:  □ Approved  □ Not Approved

Provost Signature: ___________________________  Date: ____________

REGISTRAR ACKNOWLEDGEMENT:

Registrar Signature: ___________________________  Date: ____________

PROVOST OFFICE TRANSMITTAL NOTIFICATION:

Date: ______________  Signature: ____________________________________________