PROCESS Q Curriculum Submission Form Rowan University Senate

Quasi-Curriculum Proposal

Proposal Title: ____________________________________________________________

Lead Sponsor: __________________________________________ Email: ______________________

Department: __________________________________________ College: ______________________

If CHSS check □ Humanities □ Social Sciences

Interdisciplinary □ No □ Intra-College □ Inter-College

DEAN APPROVAL (One Dean Signature is required for submission to the University Senate Office):

Academic DEAN: ________________________________ Date: __________

Academic DEAN (Optional): ________________________________ Date: __________

COLLEGE CC APPROVAL: Open Hearing Date: ____________ □ Approved □ Not Approved

Signature College Curriculum Chair: ________________________________ Date: __________

SENATE CC APPROVAL:

Committee Open Hearing Date: ____________ □ Approved □ Not Approved

Full Senate Vote Date: ____________ □ 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: ________________________________