

(submit one form per proposal)

**JACKSON STATE UNIVERSITY
GRADUATE CURRICULUM COMMITTEE
CURRICULAR PROPOSAL FORM**

Please submit an original and 7 copies of each. Failure to fully complete each section of this form will result in tabling the review of your proposal.

Initiator _____

Department _____

Date Initiated _____

CIP Code _____

I. ACTION TO BE TAKEN (Check all applicable changes)

_____ New Major
_____ New Program
_____ New Concentration
_____ New Course
_____ New Specialization
_____ New Concentration
_____ Number on New Course
_____ Revision of Course
_____ Revision in Course Status

_____ Deletion of Major
_____ Deletion of Program
_____ Deletion of Concentration
_____ Deletion of Course
_____ Deletion of Specialization
_____ Deletion of Concentration
_____ Change in Sequence of Curriculum
_____ Change in Course Number
_____ Cross-Referencing Course Numbers
_____ Change in Credit Hours
_____ Pre-requisites Need to be Listed
_____ Change in Course Title
_____ Variable Title

Other:

II. SPECIFY

_____ Required (core) _____ Elective _____ Concentration/Specialization
_____ Restricted to Majors _____ Prerequisite

III. JSU CATALOG DESCRIPTION OF COURSE:

(Page # _____)

Existing Catalog Description:

Proposed Catalog Description:

IV. JUSTIFICATION FOR PROPOSED ACTION:

V. ATTACHMENTS:

The syllabus or syllabi including bibliographies MUST be attached.

With the exception of deletion, the following **must** be attached:

_____	Old Curriculum	_____	Syllabus/syllabi including bibliography
_____	New Curriculum	_____	Other (itemize)

Approvals and Recommendations

Signatures required

Department Chair(s)/Program Director(s) Date

Dean of College(s)/School(s)

_____ Business

_____ Education & Human Development

_____ Liberal Arts

_____ Public Service

_____ Public Health

_____ Science, Eng. & Technology

_____ Journalism & Media Studies

Graduate Curriculum Committee Recommendation

_____ Approved _____ Disapproved _____ Tabled

_____ Modifications Needed (see attached explanation)

Signature, Curriculum Committee Chair

Date

Graduate Council Recommendation

_____ Approved _____ Disapproved _____ Tabled

_____ Modifications Needed (see attached explanation)

Signature, Chair of Graduate Council

Date

Action of Academic Affairs

_____ Approved

_____ Disapproved

_____ Tabled

Provost and Senior Vice-President
for Academic and Student Affairs

Date

For Internal Use Only			
Date Received	Date of First Review	Date Revision Received	Date Revision Received
		Date of Second Review	Date of Third Review

Form adopted October, 1974
Form revised November, 1977
Form revised November, 1978

Form revised January, 1986
Form revised March, 2000
Form revised October, 2000
Form revised December, 2015