

UNIVERSITY UNDERGRADUATE CURRICULUM COMMITTEE

CURRICULAR ACTION FORM

|  |
| --- |
| Date:  |

INITIATOR INFORMATION

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| --- | --- | --- |
| **Initiator:**  | **Email:**  | **Phone #:**  |
| **College/School:**  | **Department:**  | **Division:** |
| **Chair/Department:**  | **Email:**  | **Phone #:**  |
| **Dean:**  | **Email:**  | **Phone #:**  |

PROPOSAL INFORMATION

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| --- |
| **Course Number & Title of Course** (if applicable): |
| **Proposal Submitted:**   |

SIGNATURES

|  |  |
| --- | --- |
| **Department Chair Date** | **Dean Date** |
| **Chair, Cross Reference Dept. Date** | **Chair, Cross Reference Dept. Date** |

UGCC ACTION

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| **[ ] Approved [ ] Disapproved [ ] With Conditions [ ] Tabled** |
| **Explanation (if “w/conditions” or “tabled”):** |
| **Curriculum Committee Chair Date** |

 ACADEMIC AFFAIRS ACTION

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| --- |
| **[ ] Approved [ ] Disapproved [ ] With Conditions [ ] Tabled** |
| **Explanation (if “w/conditions” or “tabled”):** |
| **Provost/ VP- Academic Affairs Date** |