



**UNIVERSITY UNDERGRADUATE CURRICULUM COMMITTEE
CURRICULAR ACTION FORM**

Date:

INITIATOR INFORMATION

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

PROPOSAL INFORMATION

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

☐ Approved ☐ Disapproved ☐ With Conditions ☐ Tabled

Explanation (if "w/conditions" or "tabled"):

Curriculum Committee Chair Date

ACADEMIC AFFAIRS ACTION

☐ Approved ☐ Disapproved ☐ With Conditions ☐ Tabled

Explanation (if "w/conditions" or "tabled"):

Provost/ VP- Academic Affairs Date