

Program/Course abbreviated title (existing) _____ (limit 29 characters)		Course _____ Dept _____ Disc _____ Number _____ Cr hrs _____ Contact hrs _____
(proposed) <u>Communication, Media & Theatre</u> Course _____ Dept _____ Disc _____ Number _____ Cr hrs _____ Contact hrs _____		Course _____ Dept _____ Disc _____ Number _____ Cr hrs _____ Contact hrs _____
Program <input type="checkbox"/> New Program <input type="checkbox"/> Program deletion <input checked="" type="checkbox"/> Program modification <input type="checkbox"/> Program admission req.		
Other Course Information <input type="checkbox"/> Course Prerequisite Change <input type="checkbox"/> Course number change <input type="checkbox"/> Course title change <input type="checkbox"/> 300-level proposed for graduate credit		
Constraints Requirement of General Education Program: <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Major Only <input type="checkbox"/> Jr. & Sr. <input type="checkbox"/> Fr & Soph. <input type="checkbox"/> Grad Only <input type="checkbox"/> None Restriction by student level: <input type="checkbox"/> None <input type="checkbox"/> Fr & Soph. <input type="checkbox"/> Jr. & Sr. <input type="checkbox"/> Grad Only Times offered/year: _____ Number students/year: _____		
Prerequisites: _____ Program requirement: <input type="checkbox"/> Y <input type="checkbox"/> N (Program name) _____		
Linked Courses: _____ (Dept/Disc/Number and abbr. title) _____		
Materials Submitted <input type="checkbox"/> Syllabus (required) <input checked="" type="checkbox"/> Proposal Checklist <input type="checkbox"/> Added Support (chair level) <input type="checkbox"/> Other Support (college level) <input type="checkbox"/> Summary Table of Proposed changes		
1. Review by Department: <u>Almon</u> (signature) <u>2/25/09</u> (date) 2. Review by Chair: <u>Brittina Bl-Jordan</u> (signature) <u>2/25/09</u> (date)		
3. Review by CAAC: <u>Paula Acosta</u> (signature) <u>3/12/09</u> (date) 4. Review by College Dean: <u>Doreen Buchanan</u> (signature) <u>3/12/09</u> (date)		
5. Review by GCAC: <u>[Signature]</u> (signature) <u>3/31/09</u> (date) 6. Review by Graduate Dean: <u>John Groat Fruehicks</u> (signature) <u>3/31/09</u> (date)		
7. Review by GEC: _____ (signature) _____ (date)		
8. Review by FCAA: <u>[Signature]</u> (signature) <u>4/12/09</u> (date) 9. Approved by Provost: <u>[Signature]</u> (signature) <u>4/16/09</u> (date)		