



NORTHEASTERN ILLINOIS UNIVERSITY CURRICULAR PROPOSAL TRANSMISSION FORM

Program/Course abbreviated title (existing) _____ (limit 29 characters) Course Dept _____ Disc _____ Number _____ Cr hrs _____ Contact hrs _____

(proposed) UNDERGRADUATE CERTIFICATE IN GIS Course Dept _____ Disc _____ Number _____ Cr hrs _____ Contact hrs _____

- Program
New Program
Program deletion
Program modification
Program admission req.

- Course
New Course
Course deletion
Course description change
Title varies
Web-based course

- Other Course Information
Course Prerequisite Change
Course number change
Course title change
300-level proposed for graduate credit

- Constraints
Requirement of General Education Program

Restriction by student level
None
Fr & Soph.
Grad Only

Major Only
Jr. & Sr.
Times offered/year
Number students/year

Prerequisites _____ Program requirement Y N N _____ (Program name) _____

Linked Courses _____ Elective Y N _____

(Dept/Disc/Number and abbr. title)

Materials Submitted

- Syllabus (required)
Proposal Checklist
Added Support (chair level)
Other Support (college level)
Summary Table of Proposed changes

1. Review by Department (signature) (date) 11/06/08
3. Review by CAAC (signature) (date) 12/4/08
5. Review by GCAC (signature) (date)
7. Review by GEC (signature) (date)
8. Review by FCAA (signature) (date) 1/16/09

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