

TOPIC COURSE APPROVAL ROUTING CHECKLIST

DEPARTMENTAL ACTION

Course Number: _____.

Title: _____
(No more than 70 characters)

Abbreviation to be used in Master Schedule: _____
(No more than 15 characters)

Course Offering Schedule: This course will be offered:

Intellectual Foundations Category

____ Arts (R) ____ Humanities (U) ____ Natural Science (N) ____ Social Science (O)
____ American History (V1) ____ Western Civilization (V2) ____ Diversity (D)
____ World Civilizations (V3) ____ Technology & Society (T)
____ Mathematics & Quantitative Reasoning (Z) ____ Oral Communication (P)

Approved with confirmation that all necessary laboratories, studios, resources and facilities for support of this course are available.

Date Signature of Department Chairperson Department

Four (4) copies forwarded to Dean on _____.

DEAN'S ACTION

Approved with confirmation that all necessary laboratories, studios, resources and facilities for support of this course are available.

Date Signature of Dean Faculty

SENATE INTELLECT FOUNDATIONS OVERSIGHT COMMITTEE ACTION

Approved for the _____ Intellectual Foundations category.

Date Assistant Dean for Intellectual Foundations

ACADEMIC AFFAIRS ACTION

Date Signature