

COURSE ACTION FORM

All sections on this form must be complete before submission.

FALL _____	SPRING _____	SUMMER _____
DEPT ABBR: _____		ENTITY CODE: _____

I. CHANGES IN:

	FROM	TO
COURSE #:	_____	_____
TYPE:	_____	_____
TITLE:	_____	_____
CR HRS:	_____	_____

REASON FOR CHANGE: _____

II. ADDING A COURSE TYPE (E.G. REC, LAB) OF PREVIOUSLY APPROVED COURSE TO MASTER CATALOG:

COURSE #:	TYPE:	CR HRS:	TITLE:
_____	_____	_____	_____

III. DELETING A COURSE FROM THE PERMANENT COURSE CATALOG. USE ONLY WHEN THE COURSE IS INACTIVE AND WILL NOT BE OFFERED IN THE FUTURE:

COURSE #:	TYPE:	TITLE:
_____	_____	_____

IV. ADDING A COURSE PENDING COURSE APPROVAL:

COURSE #	TYPE:	TITLE:
_____	_____	_____
CR HRS:	SEM:	YEAR:
_____	_____	_____

V. REINSTATING PREVIOUSLY APPROVED COURSE.

COURSE #:	TYPE:	TITLE:
CR HRS:	APPROVAL DATE:	LAST OFFERED DATE:

Scheduler's Signature:	Date:
Graduate or DUAS Dean's Signature:	Date: