



C o m m u n i t y  
C O L L E G E

# Approval Form for Courses

*This form is to be retained by the department or division chair or designee.*

*Please check one box below.*

- NEW COURSE*     *299 COURSE*     *COURSE REVISION*

*Check appropriate box.*

- Course designator
- Number
- Title
- Credits
- Description
- Prerequisite
- Corequisite

Common Course Number & Title

\_\_\_\_\_

Department/Division: \_\_\_\_\_

Justification for course/or justification for change (optional for 299 courses):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Expected Term Offered:     Spring     Summer     Fall     Winter    Year \_\_\_\_\_

Approved by Department/Division: \_\_\_\_\_

Signature of Chair

Date

Approved by CAP:

*Received for 299*

Signature of Chair

Date

Approved by Senate:

*Received for 299*

Signature of Chair

Date

Approved by Administration

Signature of President or Academic Dean    Date