

# COURSE PROPOSAL APPROVAL TRACKING FORM

NAME OF COURSE INTRODUCTION TO EVOLUTION

## SIGNATURES REQUIRED PRIOR TO SUBMISSION

Academic Department		
Proposal Originator(s):	<u>[Signature]</u> Signature	<u>10/4/2016</u> Date
	_____ Signature	_____ Date
Department Vote for Approval:	# Yes <u>16</u> # No <u>0</u> # Not Voting <u>3</u> <i>(Department members voting "no" may submit a separate report)</i>	
Department Chair:	<u>[Signature]</u> Signature	<u>10/4/16</u> Date
Academic Dean:	<u>[Signature]</u> Signature	<u>10-4-16</u> Date

**Note:** All sections of this form must be completed and submitted with all required attachments to the Chair of the Curriculum Committee according to published distribution schedule. Should you have any questions, call the Office of the Dean of Business, Science and Technology, 825-2147.

## CURRICULUM REVIEW COMMITTEE MEETING FOLLOW UP

Meeting Date: <u>10/21/16</u>	Committee Vote: # Yes <input checked="" type="checkbox"/> <u>13</u> # No <input type="checkbox"/> <u>0</u> # Abstentions <input type="checkbox"/> <u>0</u>	
Curriculum Committee Chair:	<u>[Signature]</u> Signature	_____ Date
<input checked="" type="checkbox"/> Forward to VPAA and President	<input type="checkbox"/> Return to Department	
V.P. for Academic Affairs:	<u>[Signature]</u> Signature	<u>10/28/16</u> Date
<b>READY FOR IMPLEMENTATION</b>		
President:	<u>[Signature]</u> Signature	<u>11/3/16</u> Date

File: Office of Vice President for Academic Affairs

# COURSE PROPOSAL APPROVAL TRACKING FORM

NAME OF COURSE Medical Surgical Nursing 1

**RECEIVED**  
SEP 22 2016

**SIGNATURES REQUIRED PRIOR TO SUBMISSION**

**ACADEMIC AFFAIRS**

<b>Proposal Originator(s):</b>	<u>Jeanne S Melell</u> Signature	<u>9/22/16</u> Date	
	_____ Signature	_____ Date	
<b>Department Vote for Approval:</b>	# Yes <u>X</u> # No _____	# Not Voting _____	
	<i>(Department members voting "no" may submit a separate report)</i>		
<b>Department Chair:</b>	<u>[Signature]</u> Signature	<u>9/22/16</u> Date	
<b>Academic Dean:</b>	<u>[Signature]</u> Signature	<u>9/23/16</u> Date	

**Note:** All sections of this form must be completed and submitted with all required attachments to the Chair of the Curriculum Committee according to published distribution schedule. Should you have any questions, call the Office of the Dean of Business, Science and Technology, 825-2147.

## CURRICULUM REVIEW COMMITTEE MEETING FOLLOW UP

Meeting Date: <u>10/21/16</u>	Committee Vote: # Yes <input checked="" type="checkbox"/>	# No <input type="checkbox"/>	# Abstentions <input type="checkbox"/>
<b>Curriculum Committee Chair:</b>	<u>[Signature]</u> Signature	_____ Date	
<input checked="" type="checkbox"/> Forward to VPAA and President		<input type="checkbox"/> Return to Department	
<b>V.P. for Academic Affairs:</b>	<u>[Signature]</u> Signature	<u>10/28/16</u> Date	
<b>READY FOR IMPLEMENTATION</b>			
<b>President:</b>	<u>[Signature]</u> Signature	<u>11/3/16</u> Date	

File: Office of Vice President for Academic Affairs

# COURSE PROPOSAL APPROVAL TRACKING FORM

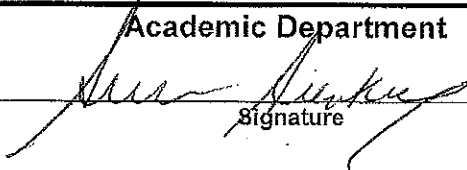
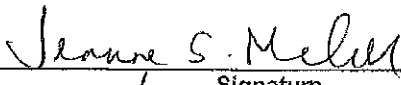
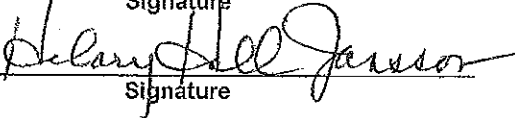
**RECEIVED**

NAME OF COURSE NURS 1023 Mental Health Nursing

SEP 22 2016

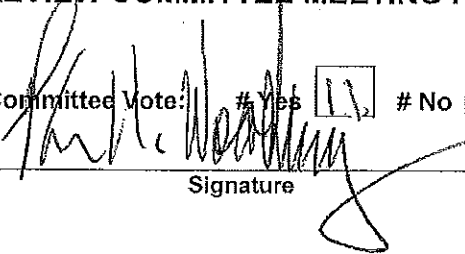
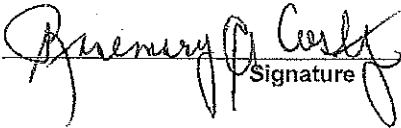
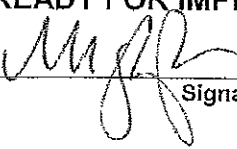
**SIGNATURES REQUIRED PRIOR TO SUBMISSION**

**ACADEMIC AFFAIRS**

<b>Academic Department</b>	
Proposal Originator(s):	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">                       Signature                 </div> <div style="width: 35%;">                     9/22/16                      Date                 </div> </div>
Department Vote for Approval:      # Yes <u>X</u> # No _____      # Not Voting _____ <i>(Department members voting "no" may submit a separate report)</i>	
Department Chair:	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">                       Signature                 </div> <div style="width: 35%;">                     9/22/16                      Date                 </div> </div>
Academic Dean:	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">                       Signature                 </div> <div style="width: 35%;">                     9/22/16                      Date                 </div> </div>

**Note:** All sections of this form must be completed and submitted with all required attachments to the Chair of the Curriculum Committee according to published distribution schedule. Should you have any questions, call the Office of the Dean of Business, Science and Technology, 825-2147.

## CURRICULUM REVIEW COMMITTEE MEETING FOLLOW UP

Meeting Date: <u>10/21/16</u>	Committee Vote: # Yes <input checked="" type="checkbox"/> # No <input type="checkbox"/> # Abstentions <input type="checkbox"/>
Curriculum Committee Chair:	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">                       Signature                 </div> <div style="width: 35%;">                     Date                 </div> </div>
<input checked="" type="checkbox"/> Forward to VPAA and President	<input type="checkbox"/> Return to Department
V.P. for Academic Affairs:	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">                       Signature                 </div> <div style="width: 35%;">                     10/28/16                      Date                 </div> </div>
<b>READY FOR IMPLEMENTATION</b>	
President:	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">                       Signature                 </div> <div style="width: 35%;">                     11/3/16                      Date                 </div> </div>

File: Office of Vice President for Academic Affairs